Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,

2. the CoC Priority Listing, and

3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

- 1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
- 3. All information provided to ensure it is correct and current.
- 4. Responses provided by project applicants in their Project Applications.
- 5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with-if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to

appeal HÚD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

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1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition

- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFR part 578

1A-1. CoC Name and Number: MD-505 - Baltimore County CoC

1A-2. Collaborative Applicant Name: Baltimore County Department of Housing and

Community Development

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Baltimore County Department of Planning

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

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- 24 CFK part 578

1B-1.	Inclusive Structure and Participation-Participation in Coordinated Entry.
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.
	In the chart below for the period from May 1, 2020 to April 30, 2021:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted-including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing of CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	No	No	No
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	CoC-Funded Victim Service Providers	Yes	Yes	Yes
5.	CoC-Funded Youth Homeless Organizations	No	No	No
6.	Disability Advocates	Yes	Yes	Yes
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
10.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
11.	Hospital(s)	Yes	Yes	Yes
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	Yes	Yes	Yes
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
15.	LGBT Service Organizations	Yes	Yes	Yes
16.	Local Government Staff/Officials	Yes	Yes	Yes
17.	Local Jail(s)	Yes	Yes	Yes
18.	Mental Health Service Organizations	Yes	Yes	Yes

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Applicant: Baltimore County - MD CoC **Project:** MD-505 CoC Registration FY 2021

		1	1	1
19.	Mental Illness Advocates	Yes	Yes	Yes
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
23.	Organizations led by and serving LGBT persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	N/A	No	No	No
34.	N/A	No	No	No

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

(limit 2,000 characters)

1-Our CoC utilizes our county government website as well as the CoC Homeless Roundtable website to invite members of the public to our meetings. We utilize other social media outlets, present at partner resource fairs or other public forums where homelessness is discussed to solicit new membership. During our monthly meetings and the regular meetings of our 6 sub-committees, we invite representatives from government and non-governmental organizations, local businesses, foundations, community members and civic groups to attend. Anyone may join our email list by signing up on our public website.

2-Our CoC has the ability to utilize TTY, TTD, and other messaging apps for our current hearing impaired members, and will continue to adhere to all ADA laws. Also, due to COVID 19, we have been holding the Roundtable virtually and are able to record the meeting and distribute to everyone on the listserv.

3-Our providers that interface regularly with those experiencing homelessness do invite consumers to our CoC meetings. Prior to COVID we had a consumer advisory group that met quarterly. The pandemic made it more challenging for this group to meet regularly but we plan to bring this effort back to inform the

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work of our CoC.

4- Our CoC upholds the value of diverse voice in the work we do and continuously strive to encourage leaders of organizations serving diverse populations to join and participate in our meetings. Outreach providers regularly attend and are vocal participants in our CoC discussions as are all of our provider agencies.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.
	NOFO Section VII.B.1.a.(3)
	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,000 characters)

1-The Baltimore County Homeless Roundtable solicits and considers the opinions from a representative body comprised of the following organizations: for-profit and non-profit, faith-based, public, private and community organizations, state and local government, formerly homeless and homeless persons, homeless service providers and advocates. Members of our CoC comprise representation from each of these groups. 2-Our CoC works in partnership with our lead agency, which is the newly formed Dept. of Housing and Community Development (DHCD), to host two annual meetings, held in December and May that are open to the public. The open forums are held to solicit feedback on our annual action plan draft that informs our 5 year Consolidated Plan. During the meetings, information about our grant funding and award process is shared with the public and we solicit feedback and input from attendees about what our CoC should fund in the coming year. Additionally, throughout 2021 our county held a series of public forums to solicit feedback on the consolidation of our county DHCD. That legislation was passed by county council July, 2021 and there was much public comment about how the creation of the new office would respond to the need across the county for more affordable housing and increased services for the homelessness. Our CoC leadership attended these forum. 3-The information gathered throughout all of these public meetings and hearings as well as the open dialogue and feedback gathering during our CoC meetings have and will continue to inform the work of our CoC. The feedback will also inform what we include in our grant agreements for CoC funding to providers.

1B-4.	Public Notification for Proposals from Organizations Not Pr	eviously Funded.		
	NOFO Section VII.B.1.a.(4)			
	Describe in the field below how your CoC notified the public	: :		
1.	that your CoC's local competition was open and accepting	project applications;		
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2	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
;	about how project applicants must submit their project applications;
4	about how your CoC would determine which project applications it would submit to HUD for funding; and
	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,000 characters)

- 1- On 8/19/21, our CoC notified the public that the FY21 NOFO was open and accepting project applications. We also advertised the open funding round through the COC website, social media, the County's website, emails, and announcements to grantees. We shared the steps to apply for funding and the availability of the new bonus projects. A public informational meeting was held on 9/23/21 to review the FY21 NOFO requirements and discuss submission requirements and deadlines.
- 2-The CoC does accept proposals from organizations that have not previously received CoC Program funding. The score received from our Rating and Ranking Committee determines if they are included in the final application to HUD.
- 3- The CoC informed all applicants that they had to submit their applications in E-Snaps by 10/22/21 for consideration.
- 4-The CoC relies on the rating and ranking scoring process to determine which applicants will be included in our final application to HUD.
- 5-Our CoC has the ability to utilize TTY, TTD, and other messaging apps for our current hearing impaired members, and will continue to adhere to all ADA laws.

1C. Coordination and Engagement-Coordination with Federal, State, Local, Private, and Other **Organiza**

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload - 24 CFR part 578

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.
	NOFO Section VII.B.1.b.
	In the chart below:
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Nonexistent
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBT persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

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Applicant: Baltimore County - MD CoC **Project:** MD-505 CoC Registration FY 2021

18.		Nonexistent
1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	
		_
	Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds;	
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;	
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and	
4.	provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update.	

(limit 2,000 characters)

1-The Department of Housing and Community Development (DHCD), is the lead agency for the CoC and is the recipient of ESG and CoC funding. The ESG funding is designed to identify sheltered and unsheltered homeless persons and those at risk of becoming homeless and provide services that meet system performance measures and local CoC policy priorities. In Baltimore County, the CoC and Consolidated Plan jurisdictions are the same. Current ESG and ESG-CV participants and the general public were invited to attend DHCD's annual grant funding announcement meeting on 12/15/2020, which included public comments, solicitation of feedback from grant recipients, including ESG recipients, and the public. ESG recipients were informed about the current allocations and participated in the Consolidated Plan. It was noted and documented.

2-DHCD and its experienced HMIS staff ensure that the CoC maintains vital housing inventory data. DHCD staff communicate regularly with ESG grantees to gather accurate information on CoC programs and statistics, to ensure accurate homelessness data is included in the Consolidate Plan. The CoC meets quarterly with the Maryland Interagency Council on Homelessness to establish statewide policy recommendations pertaining to homelessness. The CoC Lead and HMIS Lead are responsible for evaluating performance and sharing the data with the entire CoC looking for stable housing, increasing income, and providing services to homeless individuals and families.

3-The CoC shares our PIT and HIC data to inform the Consolidated Plan.

4-Not applicable. There are no other Consolidated Plan Jurisdictions in our program area.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	
	Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported gender:	

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are	Yes
	not separated.	

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	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	No
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	
		No

1C-4.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	
	Describe in the field below.	

	Describe in the field below:
1.	how your CoC collaborates with youth education providers;
2. your CoC's formal partnerships with youth education providers;	
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

(limit 2,000 characters)

- 1-McKinney Vento coordinators within our county school system are active participants in our CoC. Our shelters providers have strong relationships with the school system as well to ensure families entering shelter with school-aged children, receive continuity in educational services while there and while they search for housing.
- 2-Our shelter providers do have formal partnerships with youth education, daycare, & Head Start providers. An example is a partnership with the YMCA that has a daycare center in our family shelter and residents have priority access.
- 3 & 4-Youth experiencing homelessness are a priority area of our County Executive. He has appointed a liaison to work with the school district and our CoC to provide quarterly updates on outcome data pertaining to youth, housing and homelessness. The CoC also works closely with our Local Management Board (LMB). Our county is one of only 2 in the state that receives funding from our Governor's office Of Crime Control and Prevention to focus on addressing homeless youth. The LMB oversees the county Youth Coalition and that group works closely with all stakeholders working to end youth homelessness in the county. During COVID the LMB secured additional funding to support the expansion of a youth outreach team, focused solely on identifying unaccompanied homeless youth and connecting them to supportive services and housing. We also have representation from our county community college system on our CoC.
- 5-Our CoC, Youth Coalition and School system work closely to complete the annual Youth Reach Count, a statewide effort in partnership with our state university system and state Dept. of Housing and Community Development. This annual count is focused on understanding the dynamics of the McKinney Vento data and happens in close partnership with our LEA.
- 6-We do have an MOU between our state and local Education partners as part

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of the Youth Reach Count effort.

CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
NOFO Section VII.B.1.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,000 characters)

The CoC informs individuals and families experiencing homelessness about education services and eligibility. The CoC requires all homeless service providers to designate a case manager to inform the county McKinney Vento Homeless Liaison about any children entering emergency shelter or transitional housing. Upon notification, school-based homeless liaisons enroll children in their school of origin, local school or Head Start program within 24-hours of entering shelter. The children are assigned to a Pupil Personnel Worker (PPW) who supports the child and family throughout their time in shelter. Baltimore County Public Schools (BCPS) has an MOU with Head Start to ensure children are enrolled in Head Start. Confidential services are provided such as transportation, case management, access to mainstream resources and tutoring. The Homeless Liaison, as well as shelter case managers, inform families of their rights under McKinney-Vento, to ensure all children receive services they are entitled to.

The CoC regularly shares information pertaining to scholarships and tuition waivers from the Maryland State Department of Education, to its members.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	Yes	No
2.	Child Care and Development Fund	Yes	No
3.	Early Childhood Providers	Yes	No
4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	Yes	No
7.	Healthy Start	Yes	No
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No

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	Other (limit 150 characters)		
10.	N/A	No	No

1C-5. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Annual Training–Best Practices.

NOFO Section VII.B.1.e.

Describe in the field below how your CoC coordinates to provide training for:

- 1. Project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
- 2. Coordinated Entry staff that addresses safety and best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,000 characters)

1-The CoC coordinated a training for over 60 members of the Homeless Roundtable focused on best practices in serving survivors of domestic violence in a trauma-informed, victim-centered manner and methods to develop safety and planning protocols. The training was coordinated with our CoC lead and our DV service provider and walked members through steps to create individualized safety plans that reduce risks to survivors and their children. Due to COVID, the training was held virtually and we plan to offer it annually moving forward. We may seek other trainers based on the recommendation of our service partners with this expertise.

2-The Coordinated Entry staff as well as the DV Coordinated Entry staff addresses safety and best practices using trauma informed care and a lethality assessment program on safety and planning protocols regularly. Staff are trained upon hire and receive refresher trainings every other month or as needed. The DV Coordinated Entry staff receive regular VAWA-compliant trainings.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

The CoC uses a combination of data from our HMIS and from a comparable database used by our DV service providers. In the final quarter of FY20, Baltimore County implemented a Phase One assessment and triage process through a parallel Domestic Violence Coordinated Entry (DV CE) system to serve those experiencing housing crises due to fleeing domestic violence, dating violence, sexual assault or stalking. This 24/7 system leverages the 30-year history of a jurisdiction-based domestic violence hotline as its primary access point and integrates a collaboration with police and Child Protective Services as an additional access point for those interacting with professionals due to intimate partner violence. A centralized Phase Two assessment was

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implemented in the final quarter of FY21 that assesses barriers to obtaining and maintaining housing in the context of the safety risks already captured in the first phase assessment to create a picture of the needed resources for survivors to move from the crisis to safe, permanent housing. Since its inception in 2018 the DV CE fielded an average of 85 calls per month from people seeking emergency sheltering and housing support. The DV CE tracks every call and referral utilizing Apricot, a Social Solutions product, and is working to consistently produce HUD and VAWA-compliant reports with de-identified aggregate data provided to the CoC. Monthly and quarterly reports are submitted to ensure trends among this population are captured in broader consideration of priorities and needs for the CoC.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors-Coordinated Assessment-Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma- informed, victim-centered approaches while maximizing client choice for housing and services that:	
1.	prioritize safety;	
2.	use emergency transfer plan; and	
3.	ensure confidentiality.	

(limit 2,000 characters)

- 1-The Domestic Violence Coordinated Entry (DV CE) parallel system's triage tool includes a danger assessment, a validated measure to assess risk for domestic violence homicide, and prioritizes emergency sheltering based on that risk. The goal of the initial assessment is to establish safety, ensure callers are engaged in safety planning and are offered follow-up by an advocate to further address their safety. The DVCE implemented a centralized assessment and referral process for all participating victim service providers to have a streamlined pathway to help their client's access housing resources. In FY21, 40+ case managers and advocates at four participating victim service agencies were trained to assess housing needs in varied environments such as court accompaniment for protective orders, support groups, helplines, and other common contexts to encounter housing vulnerabilities due to victimization. Staff received training on referral submissions to the DVCE for a client's assessment for bridge housing, such as TH and RRH for PSH. A DVCE Housing Specialist meets with each client to discuss housing resources based on needs, goals, program eligibility and connects them to all resources via a VAWA compliant referral.
- 2-The CoC's Coordinated Entry subcommittee has established an emergency transfer plan that includes both victim service providers and all other homeless service providers. The DVCE supports the emergency transfer of individuals already in a housing resource dedicated to the victim population and supports the transfer of households to other homeless resources when victimization has occurred.
- 3-All DVCE staff are trained on and sign a required confidentiality agreement upon hiring. Staff review a confidentiality disclosure agreement with all callers at the start of every call and prior to sharing any personally identifying information, informed consent is received from the client per VAWA requirements.

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Applicant: Baltimore County - MD CoC **Project:** MD-505 CoC Registration FY 2021

1C-6.	1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training.	
	NOFO Section VII.B.1.f.	

		Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBT individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access t Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?		No	
	3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	General or Limited	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Baltimore County Office of Housing	6%	No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.B.1.g.	_

 Describe in the field below:
steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference–if your CoC only has one PHA within its geographic area, you may respond for the one; or
state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,000 characters)

1-Prior to 7/1/21, the Baltimore County Office of Housing (PHA) was separate from our Office of Planning which was the lead agency for the CoC. As of 7/1/21 our county council approved the consolidation of housing and homelessness efforts and created the new county Department of Housing and Community Development (DHCD). This brought housing, homelessness and the CoC work under one agency, giving our CoC the opportunity to improve communication between the two teams and build off of the success of our EHV program which prioritized vouchers for those experiencing homelessness. The CoC has worked closely with our PHA to apply for and fill 104 Mainstream vouchers, 74 FUP

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vouchers, 318 VASH Vouchers and 25 FYI vouchers 2-Not Applicable

1C-7b.	Moving	g On Strategy with Affordable Housing Providers.		
	Not Sc	ored–For Information Only		
	Select	yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that scipients use to move program participants to other subsidized housing:		
	your re	sopients use to more program participants to other substatized flousing.		
		Multifamily assisted housing owners		Yes
	2.	РНА		Yes
	3.	Low Income Tax Credit (LIHTC) developments		Yes
	4.	Local low-income housing programs		Yes
		Other (limit 150 characters)		
	5.	RRH Committee/providers coordinate w/ smaller landlords to move people in		Yes
1C-7c.	Includi	ing PHA-Funded Units in Your CoC's Coordinated Entry System.		
		Section VII.B.1.g.		
		55515.1 F.III.21.11g.		
es your	CoC in	clude PHA-funded units in the CoC's coordinated entry process?	Ye	S
1C-7c.1.	Metho	d for Including PHA-Funded Units in Your CoC's Coordinated Entry System.		
	NOFO	Section VII.B.1.g.		
	If you	selected yes in question 1C-7c., describe in the field below:		
1.	how yo	our CoC includes the units in its Coordinated Entry process; and		
2.	whethe	er your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.		

(limit 2,000 characters)

1-Our Coordinated Entry team receives all calls for shelter, emergency housing, rental assistance etc. They use the Self Sufficiency Matrix tool to prioritize callers for services and housing. When someone calls asking for Permanent Supportive Housing (PSH), they will prioritize them accordingly to ensure the most vulnerable get referred to shelter. The shelter providers working with that client will verify their need, to qualify the individual or household for PSH within the county and help the client apply directly to the PSH.

2-We do not currently have any formal written agreements with our PHA on this process.

1C-7d	Submitting CoC and PHA Joint Applications for Funding fo	SS.	
	NOFO Section VII.B.1.g.		
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MD-505 CoC COC_REG_2021_182126

Applicant: Baltimore County - MD CoC **Project:** MD-505 CoC Registration FY 2021

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?

Yes

1C-7d.1.	CoC and PHA Joint Application–Experience–Benefits.	
`	NOFO Section VII.B.1.g.	
	If you selected yes to question 1C-7d, describe in the field below:	
1.	the type of joint project applied for;	
2.	whether the application was approved; and	
3.	how your CoC and families experiencing homelessness benefited from the coordination.	

(limit 2,000 characters)

MOUs.

Not Scored-For Information Only

- 1-The CoC and PHA have worked collaboratively over the past three years to apply for vouchers for the Mainstream program, Family Unification Program (FUP), Near Elderly Disabled 1 & 2 (NED), Foster Youth to Independence (FYI), VASH and Emergency Housing Vouchers (EHV's).
- 2-All applications were approved and we were awarded as follows: 104 Mainstream, 74 FUP vouchers (we applied for more and are awaiting a response from HUD), 150 NED 1&2 vouchers, 25 FYI vouchers, 318 VASH vouchers and 62 EHV's.
- 3-Our CoC and families experiencing homelessness benefitted from the coordination between the CoC and PHA because the joint effort has resulted in approximately 733 additional vouchers awarded to our county in addition to our Housing Choice Vouchers (HCV) allotment. Although not all of the additional vouchers have a homelessness preference, the Mainstream and Emergency Housing vouchers both do. We have filled 52 Mainstream vouchers between 10/1/20 and 9/30/21 with formerly homeless and disabled clients and we are working diligently to fill the 62 EHV's, by prioritizing homeless, chronically homeless, those fleeing DV, those at risk of homelessness and those that have been in our homeless services system the longest. As of January 2021 through September of this year, our HMIS data shows that just 1% of those leaving shelter are moving out with a voucher in hand. The partnership our COC has developed with our PHA for the EHV program is an excellent example of what future set-aside or prioritization scenarios should be.

	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	
id your C	oC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers to homelessness, including vouchers provided through the American Rescue Plan?	Yes
id your C edicated t	oC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers to homelessness, including vouchers provided through the American Rescue Plan?	Yes
id your C edicated (oC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers to homelessness, including vouchers provided through the American Rescue Plan?	Yes

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Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?

Yes

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA

Baltimore County ...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Baltimore County Office of Housing

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1C-9.	Housing First-Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	
		-
1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry,	13

	Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	13
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	13
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First-Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

In 2016, our CoC received HUD TA and has worked closely with our providers over the last five years to educate them on the approach of Housing First. We received HUD TA to gain consensus and develop written policies and procedures that uphold the principals of Housing First, Fair Housing, and Equal

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Access and Gender Protection. We have adopted policies that address barriers to housing based on gender, race, age, sexual orientation and disability. This language is written into all grant agreements and any new grantees that work within our CoC are required to comply with these guidelines. Overall our member agencies uphold the principals we have agreed to. However, when new staff start sometimes there is confusion about implementation. Violations of our Housing First agreements come to the attention of our CoC through the clients themselves or other providers learning of the improper practice. Things may also come from the established grievance process our county has developed for those living in Emergency Shelter. Once those come to the attention of our CoC lead we address it immediately. We reach out to the management of the provider agency, we provide additional technical assistance if needed and support to ensure the practice stops immediately. Prior to this year our CoC conducted annual monitoring site visits to our grantees. That will certainly resume this year and as client files are reviewed we will look for any potential violations of housing first principals or other policy requirements.

1C-9b.	Housing First-Veterans.	
	Not Scored–For Information Only	
	CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly permanent housing using a Housing First approach?	Yes
1C-10.	Street Outreach-Scope.	
	NOFO Section VII.B.1.j.	
	Describe in the field below:	
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;	
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;	
3.	how often your CoC conducts street outreach; and	
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.	

(limit 2,000 characters)

- 1-The CoC works to reach all unsheltered and unstably housed people by utilizing our street outreach providers. Referrals for unsheltered individuals go through our CoCs Coordinated Entry point and individuals or referring sources have the ability to call the outreach provider directly. The team has up to 72 hours to respond to an unsheltered person but typically responds in 24 hours. Prologue is a provider that offers a no-barrier homeless outreach drop in center in Towson that provides case management and access to food, shower and laundry.
- 2-The CoC outreach provider covers 100% of the county land (598 square miles). The team visits and engages clients in the 150 active encampments across the county on a regular basis.
- 3-Street outreach occurs Mon-Fri during normal business hours, but the provider is client-centered and is flexible on the schedule to address client needs outside of that timeframe.

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4-Our outreach team is highly experienced in connecting with individuals who are least likely to request assistance. The team takes time to build rapport, offers basic necessities to build trust and demonstrate a person-centered approach. There is a fine balance between building trust and encouraging those living unsheltered, to accept services, shelter or housing. Through multiple visits, holding to commitments and follow up on specific client requests, outreach teams establish lasting rapport with those who are hardest to reach.

1C-11.	Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	No
4.	Implemented communitywide plans	No
5.	Other:(limit 500 characters)	
	Department of Public Works, Health Department, Office of Community Engagement and the County Executives Office	Yes

1C-12.	Rapid Rehousing-RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.I.	

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC-only enter bed data for projects that have an inventory type of "Current."	175	164

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care		Assist with Utilization of Benefits?
	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	Yes	Yes
3.	Nonprofit, Philanthropic	Yes	Yes
4.	Other (limit 150 characters)		

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-13a.	Mainstream Benefits and Other Assistance–Information and Training.
	NOFO Section VII.B.1.m
	Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:
1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

Aging.

- 1-The CoC strives to help providers connect their clients with mainstream resources and other forms of income. Our partners with the Department of Social Services (DSS) present periodic refresher trainings at our monthly CoC meetings. The last one held was in September 2021. This method allows providers to receive an overview of the various mainstream resources available and learn how to access those resources. SSDI, Outreach, Access and Recovery (SOAR) is a very helpful support to our providers and connections to a SOAR case manager are made through outreach and engagement staff. This engagement helps clients' secure SSI income in an expedited manner. The primary homeless outreach provider for our COC is Prologue and they employ a full-time SOAR specialist. Other providers have taken steps to get SOAR certification training for members of their teams as well, which has proven to be highly beneficial to our CoC.
- 2-The CoC communicates information about available resources and other assistance monthly at the CoC meeting as well as a weekly email distribution shared with our member organizations. Resources shared on this list have increased throughout COVID.
- 3-The CoC collaborates with healthcare organizations to assist program participants with enrolling in health insurance. An example of this are the nurses employed at our shelters, have enrolled participants in healthcare coverage. We also coordinate health care for those until coverage is secured and we partner with Healthcare for the Homeless to provide services for participants in our programs. We have several healthcare providers attend our CoC meetings who provide continued education and connections to healthcare services.

 4-The CoC consistently promotes and provides assistance with the effective utilization of Medicaid and other benefits by connecting individuals and families to the Department of Social Services, Department of Health and Department of

1C-14.	Centralized or Coordinated Entry System–Assessment Tool Attachments Screen.	. You Must Upload an Attachment to the 4E	3.
	NOFO Section VII.B.1.n.		
	Describe in the field below how your CoC's coordinated ent	ry system:	

	1.	covers 100 percent of your CoC's geographic area;
	2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	3.	prioritizes people most in need of assistance; and
ĺ	4.	ensures people most in need of assistance receive assistance in a timely manner.

(limit 2,000 characters)

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- 1-The Coordinated Entry (CE) system covers the entire CoC geographic area of Baltimore County. The CE call-in number assists people in various ways with a range of shelters, housing programs and supportive services. Clients seek access to services via the CE system through specified access points and all services are provided countywide. The CoC affirmatively markets housing and supportive services to eligible persons regardless of race, color, national origin, sex, age, disability, familial status or who are least likely to apply in the absence of special outreach.
- 2-Prologue Outreach staff coordinates with other agencies to provide access to emergency shelter for those least likely to seek services. When outreaching to individuals/families, they provide information about and/or assistance in obtaining shelter to those who are willing to go. If someone refuses, the outreach teams informs the person how to access the Freezing Weather Shelter.
- 3-CE uses the self-sufficiency matrix to determine vulnerability. The lower the score indicates the most vulnerable who should be prioritized for services and shelter.
- 4-The tool that we use provides a score to indicate those in most severe need of emergency shelter. The score that justifies the highest need receives first priority for shelter. Throughout COVID, our shelters have been operating at 50% capacity, but we have utilized hotel space to accommodate those in most need who are unable to stay unsheltered. We also have a cold weather shelter that operates on the coldest nights between Nov. & April and receives anyone in need of shelter regardless of screening score.

1C-15.	Promoting Racial Equity in Homelessness-Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	
		T
	C conduct an assessment of whether disparities in the provision or outcome of homeless assistance n the last 3 years?	No
		<u>'</u>
1C-15	a. Racial Disparities Assessment Results.	
10 10	NOFO Section VII.B.1.o.	
	NOTO Section VII.B. 1.0.	
	Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.	
1. Peop	le of different races or ethnicities are more likely to receive homeless assistance.	Yes

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3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	Yes
	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	Yes
	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	Yes

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	No
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

As a CoC focused on responding to the needs of those experiencing homelessness within our jurisdiction, we acknowledge that due to a history of housing discrimination, lack of equitable access to resources such as health

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care, education and employment disparity is a reality that exists within our system and we must fully commit to acknowledging the disparities through transparent communication, equitable, and collaborative approaches to problem solving to address these disparities. Our continuum of care has a Racial Disparities committee. The purpose of that committee is to educate and empower members with the tools necessary to address, mitigate and remedy existing racial bias within their organizations or in how services are received. According to 2010 census data, 64.6% of county residents were White and 26.1% were African American. For the last 4 years, our APR data has shown severe disparity in those seeking homeless services across our system. Since 2018, on average participants have been 60-66% African American and about 28-30% white. In 2020 our Racial Disparities committee released an assessment focused on employee demographics of our providers because this is a key component to understanding disparity within our system and how services are being delivered.

COVID has adversely impacted committee participation throughout our CoC, but we will conduct a formal racial disparities assessment in FY22 to understand the dimensions of disparity that exist as well as the perceptions of disparity across our system. The committee offers regular trainings for members.

1C-16. Persons with Lived Experience–Active CoC Participation.

NOFO Section VII.B.1.p.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	0	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	0	0
3.	Participate on CoC committees, subcommittees, or workgroups.	0	0
4.	Included in the decisionmaking processes related to addressing homelessness.	0	0
5.	Included in the development or revision of your CoC's local competition rating factors.	0	0

1C-17. Promoting Volunteerism and Community Service.

NOFO Section VII.B.1.r.

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

The CoC trains provider organization staff on connecting prohomelessness with education and job training opportunities		riencing	Yes	
			•	
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	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

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	1D-1.	Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
		NOFO Section VII.B.1.q.	
			_
		Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
	1.	unsheltered situations;	
	2.	congregate emergency shelters; and	
ľ	3.	transitional housing.	

(limit 2,000 characters)

1-Homeless outreach was temporarily paused for the first month of COVID due to a lack of PPE but quickly re-started in April 2020 and continued throughout the pandemic. Outreach workers provided clients with supplies and due to the county health departments encouragement for everyone to shelter in place if safest, teams provided unsheltered clients with more supplies to help them do so. ESG funds were used to house those living on the street who were most medically frail. Our outreach provider delivered meals to those living on the street and in hotels. Two drop in centers were opened up in the county in partnership with the YMCA to provide access to showers and toilets. Our outreach provider partnered with Healthcare for the Homeless to provide vaccines to those on the street.

2-We limited shelter capacity to 50% of regular capacity. We conducted COVID testing and required quarantine for up to 14 days before anyone was admitted to shelter. We utilized hotels for the more elderly and medically frail people who needed emergency shelter. We staggered meal times to allow for social distancing in the dining areas. Beds and sleeping areas were spaced out to allow for social distancing and when possible we housed families in the same room. PPE was given to shelter residents and handwashing stations were made available.

3-Providers working with people in transitional housing continued to visit people to ensure they were safe and not in need of additional health services. They provided PPE to residents and connected them with services as need.

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1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

Our response to COVID presented us with an opportunity to establish policy and protocols that can be refined and utilized for years to come. The CoC and provider agencies met weekly to discuss the changing public health response and partnered closely with our County Public health agency to create thresholds for capacity and safe service delivery that met the evolving need. The process our CoC established to consult with providers and the health department at each step is something we would replicate. The policies that have been created will remain and we have learned how nimble our system can be in some ways and where there are harder lines that must be followed. This has been such a valuable learning experience for our CoC. While we hope the extreme nature of the response will not be something we will have to repeat soon, it forced our CoC to establish valuable protocol for future public health emergencies. We will carry over the best practices we developed and not repeat inefficient practice decisions.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	
	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:	
1.	safety measures;	
2.	housing assistance;	
3.	eviction prevention;	
4.	healthcare supplies; and	
5.	sanitary supplies.	

(limit 2,000 characters)

- 1-The community organizations we work with are established homeless service providers. They reallocated other funds to implement COVID responsive safety measures and ensured continued program operations before the ESG-CV funds became available. Once the ESG-CV funds became available and Personal Protective Equipment (PPE) supplies were available to order in bulk, the CoC sent PPE supplies out to funded providers and replenished upon request. 2-The CoC decided to allocate a portion of the ESG-CV grant to rapid rerehousing (RRH) assistance to extend rental assistance for current placements to prevent people from returning to homelessness and to provide RRH funding for new recipients. We entered into a contract with four local non-profit housing providers to administer the RRH program, all of which were prior RRH providers.
- 3-Baltimore County dedicated ESG-CV funds to eviction prevention efforts through two non-profit community providers already funded to provide this service. The goal was to keep as many people housed throughout the COVID pandemic to prevent their entering the homeless services system.

 4-The CoC provided healthcare supplies and cleaning supplies across all programs prior to ESG-CV funding availability.

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5-Programs have always used shelter funding to cover sanitary supplies so no additional requests were received for this, but it was an allowable expense through ESG-CV as well as CoC funds.

1D-4.	CoC Coordination with Mainstream Health.
	NOFO Section VII.B.1.q.
	Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:
1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

1-The CoC worked closely with the Baltimore County Health Department to ensure that individuals and families in the shelter and on the street got tested for COVID-19. If they tested positive, they were placed in a hotel room for up to 14 days and meals were provided for breakfast, lunch, and dinner. After their period of quarantine ended, they were placed in shelter but practiced social distancing. Some individuals and families remained housed in the hotel for safety reasons. Our CoC had no incidence of COVID-19 exposure in our shelter from March 2020 - July 2021. The CoC has continued to utilize hotel space to account for the reduced capacity in shelters.

2-The CoC ensured safety measures by implementing social distancing measures county wide. In addition, the CoC provided homeless service providers with paper face masks, hand sanitizers, rubber surgical gloves, face shields, and gowns.

1D-5.	Communicating Information to Homeless Service Providers.
	NOFO Section VII.B.1.q.
	Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:
1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

1-The CoC communicated information to homeless service providers during the COVID-19 pandemic on safety measures by sending out fliers to educate providers and individuals about this pandemic. We emphasized practicing social distance-stressing 6 ft., hand-washing, wearing face mask and gloves. In addition, we provided them with personal protective equipment (PPE) for several months as a CoC and dropped off to providers.

2-The CoC changed local restrictions by reducing congregate setting capacity such as emergency shelters to 50% capacity. In addition, the CoC providers had individuals as well as families housed in hotels instead of shelter during this COVID-19 pandemic. This was done to ensure that no outbreak occurred in the shelter. The entire 1 1/2 years of COVID-19, we had zero incidents of COVID.

3-The CoC encouraged staff and homeless individuals to get the vaccine. We supplied nurses to be at certain locations to make it convenient for the

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homeless service providers and those seeking shelter to receive emergency health services as needed. The nurses also helped to coordinate testing and vaccine distribution to the shelter residents staying in hotels.

1D-6. Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.

NOFO Section VII.B.1.q.

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

Early on when the vaccine was first made available in Maryland, supply was limited and therefore access was targeted to specific and most vulnerable populations. Our CoC partnered with Medstar health a leading provider in our county to get vaccine access to our shelter residents. Shelter staff helped transport clients to Medstar locations for the vaccine. Once supply for the vaccine became a widely available, our county health department partnered with our shelter teams to ensure anyone in shelter that wanted a vaccine can get one. We also offered on-site vaccination clinics in our shelters in January 2021. Gift cards were offered as incentive to take the vaccine. Trainings were offered to case management staff and shelter residents to educate people about the vaccine and its benefits.

1D-7. Addressing Possible Increases in Domestic Violence.

NOFO Section VII.B.1.e.

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

The jurisdiction has approached the potential for increases in domestic violence during COVID-19 as a coordinated cross-sector effort between local government agencies, victim service providers, homeless services and mainstream resource providers. Massive campaigns to promote knowledge of resources related to domestic violence took place over FY20 and FY21 including stickers with the DV hotline number, which serves as the primary access point for the parallel Domestic Violence Coordinated Entry (DV CE), being distributed on hundreds of pizza boxes and within hundreds of meal boxes provided in collaboration with county police.

Court advocates have continued to be present in county courthouses throughout the pandemic to connect victims seeking protective orders. Those advocates were trained in FY21 on submitting housing referrals to the DV CE and how to assess for housing needs in this unique setting.

The CoC has supported the expansion of dedicated housing resources to those fleeing domestic violence with increased risk due to Covid-19. The victim service provider which manages the DV CE system added a rapid re-housing program initially supported by ESG-CV RRH funds. The CoC additionally

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dedicated 12 Emergency Housing Vouchers to be administered through the DV CE parallel system. The high level of coordination among the victim service providers has translated to swift usage of allocated resources. The DVCE has worked with the CoC to expand available RRH resources as well to meet the growing need. Outside of the DVCE, the CoC as a whole engaged in public awareness campaigns across the county to educate people on the DV resources available throughout the pandemic.

1D-8. Adjusting Centralized or Coordinated Entry System.

NOFO Section VII.B.1.n.

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

At the start of COVID, the Coordinated Entry team managed by our county Department of Social Services required a negative COVID test for those seeking shelter, to enter shelter. To make this process easier for people seeking shelter, our team met those seeking shelter at the county testing sites and helped transport people after their COVID test, to the hotel location to await their results. Once the test came back negative, people were admitted to shelter or our overflow hotel sites. If their test came back positive, they remained in the hotel setting and received case management services there. We also had nursing staff available at the overflow locations for people who experienced symptoms or needed basic level health services. As more information became available and some of the county testing sites closed, in the summer of 2021, shelters began offering COVID testing onsite and provided a quarantine option within the shelter until a negative test was confirmed for everyone seeking emergency shelter.

Additionally, the CoC and shelter lead team worked with surrounding jurisdictions to ensure we were connecting people seeking shelter, with the right shelter location, closest to where they were receiving benefits or where they were once employed. Since some public services were closed during COVID it was important to provide shelter to people close to where they already had established service relationships. This year, we are receiving HUD TA on improving our Coordinated Entry system.

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1E. Project Capacity, Review, and Ranking-Local Competition

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
NOFO Section VII.B.2.a. and 2.g.	

	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	08/18/2021	
	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	10/15/2021	

1E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.

NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	No
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	No

1E-2a. Project Review and Ranking Process-Addressing Severity	of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

- 1. the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
- 2. considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,000 characters)

- 1-The specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects for 2019 was using the updated Rating and Ranking tool provided by HUD as a baseline with a few adjustments. Some vulnerabilities the CoC considered when reviewing, ranking, and rating projects were income at project entry, individuals having more than one disability type, and individuals entering the project from a place not meant for human habitation.
- 2-The CoC takes the severity of needs and vulnerabilities into account when reviewing and ranking projects, we adjusted expectations for projects based on project type. When the level of need within the community is substantial for a particular service, that will override a rating and ranking score. An example of this is with our only CoC funded outreach project.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

Describe in the field below how your CoC:

- obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
- 2. included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
- 3. rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

(limit 2,000 characters)

- 1-The Racial Disparity committee gathered information from a CoC Racial Equity Analysis Tool that displays racial demographics of the county and the allocation of resources for the county. This includes individuals and families with children.
- 2-This tool shows persons of different races, ages, military status i.e. race and ethnicity.
- 3-The homeless population demographics for our CoC for individuals and families are as follows: White (Non-Hispanic/Non-Latino 29% (375); White (Hispanic/Latino 1% (9); Black or African American 65% (846); Asian 1% (10); American Indian or Alaska Native 1% (10); Native Hawaiian / Other Pacific Islander <1% (3); Multiple Races 2% (26); and Unknown 0% (0).

1E-4.	Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

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	Describe in the field below:
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

1-Our CoC has not reallocated funds in the last 6 years, so our process for reallocation was not as formal this year as it will be in future years. The team has a new lead and reallocation was made a priority for our CoC this year to qualify for valuable bonus funding. This year we chose providers to receive reallocation based on funds that went unspent from the prior fiscal year. We also considered other performance criteria such as turning invoices in on time as well as performance data. Since we completed our reallocations immediately following our rating and ranking process, overall performance, scored by the rating and ranking process, was also a factor.

2-The CoC lead identified 4 projects that met our criteria for reallocation. 3-We did not reallocate entire projects this year, we simply reallocated a portion of overall CoC funding that went unspent during the prior fiscal year. We could not afford, nor justify reallocating entire projects. During the coming year, we will create a formal reallocation schedule that will be transparent with our CoC members and grantees. The criteria will be decided and approved by the CoC based on system performance measures and spending patterns of each provider. The decisions will be made and communicated to each grantee ahead of next years NOFO application process.

4-Not applicable, we did reallocate this year.

5-A general announcement about the reallocation process was made during our 11/9/21 CoC meeting. We shared the rational we would be using to determine reallocation eligibility. On 11/12/21, we contacted each grantee that would be reallocated and had discussions with each about the impact of those reallocations. Following those discussions, we compromised and reduced the reallocation amount for one grantee to preserve the staff person they finally hired that was the cause of the unspent funds. To avoid having to return the funds to HUD, we shifted the reallocated amounts to our DV and PSH bonus projects.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	
Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?		No

1E-5. Projects Rejected/Reduced-Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
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NOFO Section VII.B.2.g.

1.	Did your CoC reject or reduce any project application(s)?	Yes
	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	11/12/2021

1E-5a.	Projects Accepted-Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

tions were accepted and ranked on the 11/04/2021	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.
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Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website-which	11/15/2021
included:	
1. the CoC Application; 2. Priority Listings; and	
3. all projects accepted, ranked where required, or rejected.	

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

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2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
nter the n	ame of the HMIS Vendor your CoC is currently using.	у	
	UNIO landa and disconsisting Occurrent Association	1	
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
elect fron	n dropdown menu your CoC's HMIS coverage area.	Single CoC	
	- · · · · · · · · · · · · · · · · · · ·		
2A-3.	HIC Data Submission in HDX.		
	NOFO Section VII.B.3.a.		
nter the d	ate your CoC submitted its 2021 HIC data into HDX.	05/08/2021	
2A-4.	HMIS Implementation-Comparable Database for DV.		
	NOFO Section VII.B.3.b.		
	Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:		
1.	. have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and		
2.	submit de-identified aggregated system performance measures data for each project in the comparal database to your CoC and HMIS lead.	ble	
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MD-505 CoC COC_REG_2021_182126

Applicant: Baltimore County - MD CoC **Project:** MD-505 CoC Registration FY 2021

1-The DV housing and service providers in our CoC have secured a comparable database that collects the required data elements in the HUD-published 2020 HMIS Data Standards. The DV software vendor has also recently updated their database to be in compliance with the new HUD-published 2022 HMIS Data Standards, which went into effect on October 1, 2021. This mandate is listed in all of our grant agreements, often discussed at our monthly CoC meetings, and highlighted during our Annual Grantee Orientation Meetings. The CoC Lead and HMIS Lead have also received training by HUD TA in the past year for this specific matter. The HUD TA, Collaborative Solutions, reviewed the vital components of the Violence Against Women Reauthorization Act of 2013, as well as how DV software vendors are required to produce de-identified HUD HMIS CSVs to upload to Sage. Our DV housing and service providers, DV software vendor, and CoC Lead Office were involved in these HUD TA sessions.

2-Our CoC confirmed successful Sage uploads from the DV software vendor this year.

2A-5.	Bed Coverage Rate-Using HIC, HMIS Data-CoC Merger Bonus Points.	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	519	33	486	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	76	6	70	100.00%
4. Rapid Re-Housing (RRH) beds	164	0	164	100.00%
5. Permanent Supportive Housing	597	0	289	48.41%
6. Other Permanent Housing (OPH)	0	0	0	

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.
	NOFO Section VII.B.3.c.
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

1-Of the 597 Permanent Supportive Housing beds in the CoC, 308 are HUD-VASH, and are not participating in HMIS. The CoC will continue to reach out to Veterans Affairs Technical Advisers and Regional Coordinators to seek their participation in HMIS. They are not mandated to enter into HMIS, and lack the staffing for additional data entry. The local HUD-VASH agency enters client data into the VA database. We have reached out to our HUD-VASH contacts several times in the past but have not yet been successful in bringing them into

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HMIS. However, the CoC has recently established a better working relationship with the HUD-VASH agency during the past couple of years when they joined the CoC's Ending Veteran Homelessness Committee. This committee meets on a monthly basis for case conferencing to review our Veteran By Name List of homeless veterans, which happens to be in our HMIS. The HUD-VASH agency is aware of the CoC's obligations, and now understands that the CoC has been penalized for their lack of participation in HMIS.

2-For the first time, the CoC is currently in ongoing discussions with the HUD-VASH agency to possibly get their data into HMIS within the next 12 months. With the help from our VA representatives, HUD TA, and the CoC, we are hopeful for a successful outcome.

2A-5b.	Bed Coverage Rate in Comparable Databases.		
	NOFO Section VII.B.3.c.		
nter the p	ercentage of beds covered in comparable databases in your CoC's geographic area.		100.00%
	. , , , , , , , , , , , , , , , , , , ,		
2A-5b.	1. Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.		
	NOFO Section VII.B.3.c.		
	If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below	w:	
	1. steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 per and	cent;	

(limit 2,000 characters)

Not applicable

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.		
	NOFO Section VII.B.3.d.		
Did your C	oC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	Yes	

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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

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2B-1.	Sheltered and Unsheltered PIT Count-Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	
oes your	CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
		,
2B-2.	Unsheltered Youth PIT Count–Commitment for Calendar Year 2022.	
2B-2.	Unsheltered Youth PIT Count–Commitment for Calendar Year 2022. NOFO Section VII.B.4.b.	
2B-2.		

2C. System Performance

To help you complete the CoC Application, HUD published resources at

- https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFR part 578

2C-1.	Reduction in the Number of First Time Homeless-Risk Factors.
	NOFO Section VII.B.5.b.
	Describe in the field below:
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

(limit 2,000 characters)

1-The number of first time homeless households have been on the rise in our county for the last 5 years. We attribute this to a severe lack of affordable housing in our county. As mentioned in this application we are currently under a conciliation agreement with HUD that requires us to create/subsidize up to 1,000 affordable units over 12 years. Housing costs in our county are very high we've seen a large number of people calling for prevention services who are currently in leases they cannot sustain/afford.

2-ERAP has helped us postpone evictions and prevent people from entering shelter for the first time. However, in addition to a significant need for affordable housing, shelter diversion and prevention options are also lacking. Our CoC has 3 eviction prevention and shelter diversion providers who have committed to service about 300 people annually. This is not sufficient to meet the need of our CoC, therefore we aim to expand funding for this service. Coordinated Entry (CE) is managed by our Department of Social Services, the team is small, overburdened and lacks the specific homeless services expertise to properly triage callers. To remedy this, we are working to more than triple the size of the CE team and enhance staff knowledge on prevention and diversion strategies. In Sept. 2021 we began receiving yearlong TA from the Corporation for Supportive Housing on our CE policies and practices. Through this we will determine if the Self-Sufficiency matrix tool is properly prioritizing callers seeking shelter or could be diverting people from shelter. We will also be receiving HUD TA on our HMIS system performance measures and through that process, as a CoC we plan to utilize more data to educate our providers on these key metrics and the role they play in reducing these numbers. 3-The Baltimore County, Department of Housing and Community Development is the lead agency for the CoC and is responsible for facilitating strategy

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development across the county.

2C-2.	Length of Time Homeless-Strategy to Reduce.
	NOFO Section VII.B.5.c.
	Describe in the field below:
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,000 characters)

1-In FY17, 18 and 19, our averages for length of time homeless ranged from 82-94 days. Those averages jumped to 109 and 129 days on average for FY20. We attribute the increased averages to COVID. Households that came into emergency shelter had to stay longer during the last half of FY20 because landlords were not showing units, or allowing new move ins and subsidies from our county partners like vouchers and others moved at a slower pace due to workforce impacts during COVID. We anticipate our length of stay averages to go back to pre-COVID numbers in FY21. We acknowledge that our figures are higher than the 30 day goal, however, our County has limited affordable housing. In 2016 our county entered into a Conciliation Agreement with HUD to construct and/or subsidize up to 1,000 new units of affordable housing over the next 12 years. This will create more options for families to move out of homelessness guicker.

2-Our CoC publishes monthly performance scorecards that show the Median LOS for those in ES and leaving shelter by project type. The high medians are highlighted so providers can address them during case conferences. As a CoC we have a data quality committee that reviews this data and we have held a scorecard training during our CoC monthly meetings to brief providers on how to use the data within their programs. In the coming year we will be receiving HUD Technical assistance on our HMIS system performance measures and through that, as a CoC we plan to implement more performance based discussions with our grantees as well as utilizing these key metrics to make performance based grant-making decisions. We used length of time homeless as a prioritization criteria for our Emergency Housing Vouchers to ensure those with the longest time homeless would be eligible for a voucher.

3-The Baltimore County, Department of Housing and Community Development is the lead agency for the CoC and is responsible for facilitating strategy development across the county.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.
	NOFO Section VII.B.5.d.
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

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(limit 2,000 characters)

1-As of July 1, 2021, our county council passed legislation that created a county Department of Housing and Community Development (DHCD) which consolidates our county housing authority, CoC and grant funded homeless programs under one agency umbrella. Around the same timeframe, the council also passed a source of income protection bill to allow people with vouchers or subsidy income to qualify for housing that historically would not accept their vouchers or public benefit income. An added benefit of both teams being under one roof, we plan to work together to create a voucher set-aside programs, as well as develop a formal move-up strategy for those currently living in CoC permanent supportive housing who no longer require the increased supportive services. Additionally, in 2016 our county entered into a Conciliation Agreement with HUD to construct and/or subsidize up to 1,000 new units of affordable housing over the next 12 years. This will create more options for families to move out of homelessness quicker. Additionally, this year, we are receiving HUD TA on improving our system performance measures. 2-Having the housing authority, CoC and team responsible for administering ERAP funds under one agency umbrella has allowed us to see the gaps in the current permanent housing continuum. Through our efforts to administer ERAP we have identified a number of people who are housed in our county but paying significantly more than 30% of their income on housing. We have been able to keep them housed through ERAP, but we want to make sure they do not enter the homeless services system.

2C-4.	Returns to Homelessness-CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	
	Describe in the field below:	
1.	how your CoC identifies individuals and families who return to homelessness;	
2.	your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,000 characters)

1-As a CoC our coordinated entry does everything possible to prevent someone's return to homelessness, through shelter diversion or prevention. Prior experience with homelessness is part of our coordinated entry intake process and is worked into the care plan once the person/family begin working with a case manager in shelter.

2-Overall our returns to homelessness figures are fairly low, the few exceptions, according to our data, are 17% of those exiting ES return to homelessness after 6 months and 29% exiting ES return to homelessness within 2 years. Part of this is due to shelter providers misunderstanding the criteria and asking people to leave the shelter after 90 days, regardless of what progress they had made towards their housing plan. Additionally staff enacted an arbitrary rule that no one could come back to shelter within 1 year of leaving shelter. Both practices have since been stopped by our CoC executive committee, shelter providers have been educated on the performance measures and are working on successfully completing each individual care plan. Our shelter provider contracts are up for renewal in the coming year, we will work to include system performance measures in the renewal applications and expect care plans to be

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amended based on past shelter stays to shorten the LOS for return households. We will continue to bolster our prevention and diversion programs to avoid returns to homelessness. We also will look into the data pertaining those that moved out with RRH subsidies to see if there are connections between the length of subsidy and return to homelessness. This year, we are receiving HUD TA on improving our system performance measures.

3-The Baltimore County, Department of Housing and Community Development is the lead agency for the CoC and is responsible for facilitating strategy development across the county.

2C-5.	Increasing Employment Cash Income-Strategy.
	NOFO Section VII.B.5.f.
	Describe in the field below:
1.	your CoC's strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,000 characters)

1-COVID has certainly impacted job opportunities for people nationwide and those experiencing homelessness have been hit hard as well. Representatives from the County Department of Economic and Workforce Development (DEWD) are active participants on our CoC board. There is a formal partnership between DEWD and the CoC Rapid Re-Housing providers. RRH providers will refer participants to DEWD for resume support, interview prep, job search training focused on securing employment and where applicable, increase their earning potential. DEWD provides our CoC leadership and the county executive team with quarterly outcome reports. This year, we are receiving HUD TA on improving our system performance measures.

2-Due to COVID all employment related support services have transitioned to virtual platforms. Trainings and employment case management has continued with recipients of RRH support and others within the homeless services system interested in gaining employment. Participants have successfully gained employment with private and public sector employers such as Amazon, Architect firms and MD Health Connection. Additionally participants have signed up for and have successfully completed occupational and vocational training programs through our county community college.

3-The Baltimore County, Department of Housing and Community Development is the lead agency for the CoC and is responsible for facilitating strategy development across the county. The CoC works closely with the County Department of Economic and Workforce Development (DEWD).

2C-5a.	Increasing Employment Cash Income–Workforce Development	nent–Education–Training.		
	NOFO Section VII.B.5.f.			
	Describe in the field below how your CoC:			
1	. promoted partnerships and access to employment opportuemployment organizations, such as holding job fairs, outre agencies; and	unities with private employers and preach to employers, and partnering w	rivate ith staffing	
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2. is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

(limit 2,000 characters)

1-This year, we are receiving HUD TA on improving our system performance measures. The CoC consistently shares information with all members regarding employment opportunities with private employers and private organizations, such as: job fairs in the county or surrounding jurisdictions, training programs offered through our Community Colleges. The County Department of Economic and Workforce Development (DEWD) has been an extremely supportive partner to our CoC and has presented on multiple occasions to the members of our CoC the benefits of their programs and the support that a Career Consultant through their agency can provide.

2-Due to COVID all employment related support services have transitioned to virtual platforms. Trainings and employment case management has continued with recipients of RRH support and others within the homeless services system interested in gaining employment. Participants have successfully gained employment with private and public sector employers such as Amazon, Architect firms and MD Health Connection. Additionally participants have signed up for and have successfully completed occupational and vocational training programs through our county community college.

2C-5b.	Increasing Non-employment Cash Income.
	NOFO Section VII.B.5.f.
	Describe in the field below:
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

- 1-The CoC's strategy to increase non-employment cash income by linking individuals and families to benefit specialist because some households are not interested in employment or not able to participate due to childcare or other service barriers.
- 2-The CoC's strategy to increase access to non-employment cash resources is a focus on connecting individuals and families to providers throughout the continuum that can provide assistance to apply for mainstream resources. We have county partners and service providers present regularly during our CoC meetings so those working with clients directly are aware of how to get people matched up with necessary benefits supports.
- 3-The following organizations are responsible for overseeing the CoC strategy to increase non-employment cash income are Baltimore County Department of Social Services, Baltimore County Dept. of Health and the CoC lead (Baltimore County Dept. of Housing and Community Development).

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3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

3A-1.	New PH-PSH/PH-RRH Project-Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	
ls your Coo which are i homelessn	C applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units not funded through the CoC or ESG Programs to help individuals and families experiencing less?	Yes
3A-1a.	New PH-PSH/PH-RRH Project–Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	
	Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).	
1.	Private organizations	No
	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	Yes
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	No
3A-2.	New PSH/RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	
ls your Cot experienci	C applying for a new PSH or RRH project that uses healthcare resources to help individuals and families ng homelessness?	Yes
		-

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Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
NOFO Section VII.B.6.b.	

	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	Yes
2.	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	Yes

3A-3.	Leveraging Housing Resources-Leveraging Healthcare Resources-List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

If you selected yes to question 3A-1. or 3A-2., use the list feature icon to enter information on each project you intend for HUD to evaluate to determine if they meet the bonus points criteria.

Project Name	Project Type	Rank Number	Leverage Type
Prologue CoC Bonu	PSH	8	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? Prologue CoC Bonus Project FY2021

2. Select the new project type: PSH

3. Enter the rank number of the project on 8 your CoC's Priority Listing:

4. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New **Construction Costs**

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.r.	
		_
	C requesting funding for any new project application requesting \$200,000 or more in funding for housing Non or new construction?	0
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.s.	
		_
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and]
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that	

(limit 2,000 characters)

Not applicable

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3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
	NOFO Section VII.C.
	C requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to lies with children or youth experiencing homelessness as defined by other Federal statutes?
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.
	NOFO Section VII.C.
	If you answered yes to question 3C-1, describe in the field below:
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as
	defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and

(limit 2,000 characters)

Not applicable

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4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload - 24 CFR part 578

NOFO Section II.B.11.e. AA-1a. DV Bonus Project Types. NOFO Section II.B.11. Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry 2. PH-RRH or Joint TH/RRH Component Yes 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	4A-1.	New D	V Bonus Project Applications.				
AA-1a. DV Bonus Project Types. NOFO Section II.B.11. Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry Yes 2. PH-RRH or Joint TH/RRH Component Yes AA-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: AA-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and		NOFO	Section II.B.11.e.				
AA-1a. DV Bonus Project Types. NOFO Section II.B.11. Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry Yes 2. PH-RRH or Joint TH/RRH Component Yes AA-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: AA-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	vour C	oC sub	amit and as more now project applications for DV Pan	us Eunding?		l v	/00
NOFO Section II.B.11. Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry 2. PH-RRH or Joint TH/RRH Component Yes 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	your C	oc sub	milit one of more new project applications for DV Both	ius Fulluliig!			65
Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry Yes 2. PH-RRH or Joint TH/RRH Component Yes 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	4A-1a.	DV Bo	onus Project Types.				
its FY 2021 Priority Listing. Project Type 1. SSO Coordinated Entry Yes 2. PH-RRH or Joint TH/RRH Component Yes 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and		NOFO	Section II.B.11.				
1. SSO Coordinated Entry 2. PH-RRH or Joint TH/RRH Component 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and				f new DV Bonus project(s) your CoC	include	d in	
2. PH-RRH or Joint TH/RRH Component 4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and			Project Type				
4A-2. Number of Domestic Violence Survivors in Your CoC's Geographic Area. NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and		1.	SSO Coordinated Entry			Yes	
NOFO Section II.B.11. 1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and						1.00	
1. Enter the number of survivors that need housing or services: 2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and		2.	PH-RRH or Joint TH/RRH Component				
2. Enter the number of survivors your CoC is currently serving: 3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	4A-2.	Numbe	er of Domestic Violence Survivors in Your CoC's Geo	ographic Area.			
3. Unmet Need: 4A-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	4A-2.	Numbe	er of Domestic Violence Survivors in Your CoC's Geo	ographic Area.			
AA-2a. Calculating Local Need for New DV Projects. NOFO Section II.B.11. Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and		Numbe	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11.				
Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	1	Number NOFO	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or service	ces:			
Describe in the field below: 1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	1	Numbo	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or service r the number of survivors your CoC is currently serving	ces:			
how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and	1 2 3	Numbo	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or service r the number of survivors your CoC is currently servicet Need:	ces:			
element 1 and element 2; and	1 2 3	Numbo NOFO 1. Enter 2. Enter 3. Unmo	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or servicer the number of survivors your CoC is currently servicet Need:	ces:			
FY2021 CoC Application Page 49 11/16/2021	1 2 3	Numbo NOFO 1. Enter 2. Enter 3. Unmo	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or service r the number of survivors your CoC is currently servicet Need: lating Local Need for New DV Projects. Section II.B.11.	ces:			
	1 2 3 4A-2a.	Number NoFO 1. Enter Street Enter	er of Domestic Violence Survivors in Your CoC's Geo Section II.B.11. r the number of survivors that need housing or servicer the number of survivors your CoC is currently servicet Need: lating Local Need for New DV Projects. Section II.B.11. ibe in the field below: our CoC calculated the number of DV survivors needi	ces: ing:	4A-2		

the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or
 if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,000 characters)

1-Our County only has one shelter and housing program that exclusively serves domestic violence survivors. The numbers in 4A-2 are based on their database. 2-Our Domestic Violence shelter/housing provider uses the Apricot database to collect usage data and reports their service numbers to our CoC. The numbers are reported in a manner that ensures the confidentiality of survivors' identities and personal information.

3-The primary barrier to meeting the needs of all survivors is capacity. Currently, our provider must turn away 2 qualified survivors for every 1 who is accepted. They are turned away because of a lack of space. Based on their data, over the past two years, the program has turned away more than 200 eligible survivors annually. Our homeless shelters are often at capacity. They also lack the security and confidentiality protocols needed to ensure the safety of survivors. In addition, because our County has a very

Neighborhood/Community driven environment, even minimal safety for survivors requires relocation outside of the neighborhood where the violence occurred. Most of the homeless shelters have been in existence for some time and are well known within the community. So, they are likely to be the first place a perpetrator would look for a survivor. Therefore adding another obstacle to our ability to locate safe space for survivors since an available shelter space is only useful if it is located in an area where the survivor is not known.

4A-3. New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project-Applicant Information.	n.
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NOFO Section II.B.11.(c)

Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:

1. Applicant Name	Baltimore County, Maryland Project Applicant
2. Project Name	Family Crisis Center DV Bonus SSO-CE Project FY2021

4A-3a.	New SSO-CE Project-Addressing Coordinated Entry Inadequacy.	
	NOFO Section II.B.11.(c)	

Describe in the field below:

1. how the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and

2. how the proposed project addresses inadequacies identified in element 1. above.

(limit 2,000 characters)

1-The current parallel DV CE system has limited capacity to fully and robustly assess the housing and sheltering needs of survivors largely due to staffing constraints and the lack of flexible funding to help divert from shelter when it is safe to do so. In order to meet the needs of survivors, the DV CE must function

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in a 24/7 capacity given the dynamic nature of safety in this context. The initial funds to build the DV CE were only enough to fund one direct service position, the Housing Specialist (HS). The HS plays a key role in liaising with homeless service providers and victim service providers, ensuring knowledge and resources are communicated between these two. The HS further receives centralized referrals for bridge housing resources and conducts assessments for clients to provide options of potential housing resources and housing leads. 2-Initial calls and triage assessments are currently absorbed by other positions within the lead DV CE agency and are not funded through CE projects. Most often, shelter workers answer these calls and must balance the demands of staffing the physical shelter and the needs of the residents with being responsive to callers. Historical DV CE data suggest that adding a full-time screener during daytime, weekday hours will field about 60% of total calls. A dedicated screener allows for a more thorough assessment and creative problem solving regarding needed resources to avoid a housing crisis. Flex funds play a key role in supporting survivor choice, providing viable alternatives to emergency sheltering, and reducing the additional displacement if possible. Flex funds can be used for transportation costs to reconnect with family members, for security systems or providing for basic needs to support staying in the home safely or to address an obstacle to a successful transition like a car repair. These cost-effective measures can support the ultimate goals of coordinated entry, making instances of homelessness brief and one-time.

4A-4. New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects-Project Applicant Information.

NOFO Section II.B.11.

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

Applicant Name

Family Crisis Cen...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects—Project Applicant Information—Rate of Housing Placement and Rate of Housing Retention—Project Applicant Experience.	
 NOFO Section II.B.11.	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:

1.		Family Crisis Center DV Bonus Project FY2021
2.	Rate of Housing Placement of DV Survivors-Percentage	85.00%
3.	Rate of Housing Retention of DV Survivors-Percentage	85.00%

	Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below:

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and
- 2. the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,000 characters)

1-Housing placement rate will be calculated by the percentage of those enrolled in the joint component program that obtain a permanent housing placement while enrolled in the program. This housing placement may be as a direct result of the program such as through the housing search process of the rapid rehousing component. This has placement may also be an indirect result of program participation such as reunification with family members from which the participant had been formerly disconnected. All participants will be counted as enrolled who participate in either and/or both components of TH and PH-RRH including the housing search process. The rate of housing retention will be calculated as the percentage of participants that maintain their permanent housing placement at program exit.

2-Apricot, a comparable database, will provide all data for analyses.

4A-4b.	Providing Housing to DV Survivor-Project Applicant Experience.	
	NOFO Section II.B.11.	
	Describe in the field below how the project applicant:	
	ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;	

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2.	prioritized survivors-you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	connected survivors to supportive services; and
	moved clients from assisted housing to housing they could sustain-address housing stability after the housing subsidy ends.

(limit 2,000 characters)

1-The Family Crisis Center of Baltimore County (FCC) has extensive experience supporting survivors experiencing housing crises. FCC has run the only physical emergency safe shelter in Baltimore County for over 25 years and serves an average of 250 individuals and 100 households annually through that program, has operated a transitional housing program for over 20 years, and built a rapid re-housing program in the wake of the COVID-19 pandemic. 2-The agency designed and implemented the parallel Domestic Violence Coordinated Entry (DV CE) system and built a process compliant with HUD standards described in the CE Core Elements guidebook. Consist prioritization occurs using both an evidence based risk assessment, the Danger Assessment, and a tool to assess the barriers present to obtaining and/or maintaining housing. A centralized electronic referral system was created for bridge housing resources, and all participating victim service providers in the jurisdiction have had staff trained to complete an assessment. The projects are additionally compliant with the CoC's emergency transfer plan and have established mechanisms for emergency transfer requests among victim service providers.

3-The DV CE actively participates in the Homeless Roundtable and its subcommittees to ensure the continued access to all relevant housing resources for survivors.

4-As the coordinating agency for these efforts, FCC has extensive experience working with survivors and leveraging relationships to identify pathways to permanent, sustainable housing. FCC piloted an aftercare program to continue to engage with participants once housed before it launched its own RRH program and has numerous community partners to ensure survivors are getting the supports needed to sustain housing stability after subsidies end.

4A-4c.	Ensuring DV Survivor Safety-Project Applicant Experience.
	NOFO Section II.B.11.
	Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:
1.	training staff on safety planning;
2.	adjusting intake space to better ensure a private conversation;
3.	conducting separate interviews/intake with each member of a couple;
4.	working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
5.	maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and
6.	keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.

(limit 5,000 characters)

1-The Family Crisis Center (FCC) has an over 40-year history working with survivors and is actively involved in collaborative efforts locally and nationally

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that collect and disseminate emerging best practices to ensure the safety of all program participants. Most recently FCC led a cross-sector collective impact project in which housing emerged as a priority area to streamline pathways for connection and enhance capacities of various service providers to assess for housing vulnerabilities in the survivor population and connect DV Coordinated Entry for services. From this project, FCC provided training to over 40 case managers and advocates to assess housing needs when encountering survivors in myriad settings and engage in safety planning. 2-At intake, survivors are invited to meet in a private office and to attend to any basic needs if coming directly from the crisis before completing the intake process. All program staff receives extensive safety planning training, and safety plans are reviewed and updated at least monthly with participants. Training to safety planning highlights the client-centered approach, engaging in a fluid and ongoing conversation about the approaches that are most likely to enhance the survivor's safety based on evidence while also accounting for individual experience and circumstances. Technology safety planning is a major focus area of conversations with survivors as it represents the most common reason for accidental location disclosure among the population served. 3-Our housing services are for domestic violence survivors only. We only engage with the person fleeing the aggressor and do not interview the presumed aggressor.

4-Scattered site locations will remain confidential, and the Housing Specialist will work with each client in generating housing search parameters for the RRH component that factor in safety, privacy, and accessibility of the location. 5-All space used by survivors is maintained with the highest safety standards. Entry and exit points, locks and lighting are checked for security on an ongoing basis.

6-Service coordinators are also trained to complete the requisite paperwork for survivors who wish to participate in the Safe at Home address confidentiality program for any residence throughout their participation in the program. This mail forwarding state-sponsored program can support the continued confidentiality of the survivor's location. The program also allows for participants to utilize an agency P.O. Box if preferred. When survivors utilize a phone access point, screeners establish safety as the first step when answering a call. The caller's confidentiality is maintained by utilizing a VAWA-compliant comparable database for record-keeping.

4A-4c.1. Evaluating Ability to Ensure DV Survivor Safety-Project Applicant Experience.

NOFO Section II.B.11.

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

The Family Crisis Center (FCC) utilizes data collected regarding emergency transfer requests, discharges due to location disclosure, and calls to emergency services made in relation to program participants to monitor and evaluate the ability to ensure the safety of DV survivors in the two component projects. Incident reports are completed in relation to each instance and are reviewed on an ongoing basis.

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4A-4d.	Trauma-Informed, Victim-Centered Approaches-Project Applicant Experience.		
	NOFO Section II.B.11.		
	Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:		
1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;		
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;		
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;		
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;		
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;		
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and		
7.	offering support for parenting, e.g., parenting classes, childcare.		

(limit 5,000 characters)

- 1-Strengths-based case management, leveraging strengths already present to support goal attainment. Housing search based on preferences, need, choice, safety, priorities (children's school, bus lines, employment, etc.) Participants are provided all housing options available to them and encouraged to choose best option for themselves
- 2-All supportive services and service coordination offered on a voluntary basis. Service coordinator's role is one of engagement. Keep meeting the survivor where they are, and be responsive to needs communicated.
- Utilize rights and responsibilities model for all services delivered, including clear grievance process to engage in if there are challenges between participants or with a staff member.
- Inclusive with gender and all ages of household members, explore spirituality and cultural identities as sources of support.
- 3-Staff are trained on trauma's impact on brain, de-escalation, understanding triggers, conflict resolution; case conferencing and supervision internally focuses on constructive next steps and solutions-focused.
- 4-Specific connection to housing specialist to develop and engage in ongoing plan to move beyond housing crisis as quickly as possible
- 5-Training on cultural competence and equity and why we ask some questions and don't ask others (like criminal history in a triage space); training on understanding the connections between things like substance use or mental health challenges and abuse and how to support survivors who are navigating additional challenges.

Standards and policies on nondiscrimination and access as it relates to all protected classes; statement to participants to inform on nondiscrimination and the diversity of survivors they may encounter in programming.

6-Utilize progressive engagement model with clients with focus toward selfsufficiency and deepened community connections over time to enhance housing stability. Survivors are connected to internal and community based supports and resources. These include education, spiritual and domestic violence related focus areas.

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7-Supports for parents through Abilities Network partnership—offering children's groups, parent groups, and IEP supports/developmental milestone testing and referrals.

4A-4e.	Meeting Service Needs of DV Survivors-Project Applicant Experience.
	NOFO Section II.B.11.
	Describe in the field below:
1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and
2.	provide examples of how the project applicant provided the supportive services to domestic violence survivors.

(limit 5,000 characters)

1-The Family Crisis Center has a number of partnerships to offer additional supportive services to participants in the emergency shelter and transitional housing programs while also supporting the swift movement into permanent housing and addressing ongoing safety needs throughout the process. Participants in rapid re-housing can continue to access the same supportive services and receive assistance to address barriers to participation such as transportation. A survivor's assigned service coordinator (SC) introduces all of the voluntary supportive services and encourages the family to choose opportunities that best suit their goals. FCC has an extensive network of community partners to offer on-site and virtual supportive services to help remove barriers to attendance: Abilities Network provides parenting education and children's psycho-educational groups; Title I services include tutoring and children's therapy, an attorney with Maryland Volunteer Lawyer Services gives legal help and advice; trauma-informed yoga and mindfulness sessions are offered via contract with a local studio; therapeutic art groups from local agency Art with a Heart.

2-Both components provide survivors with ongoing case management services, victim advocacy services, resource and referral services, and mental health counseling. Every individual served benefits from this program by obtaining immediate safety from the violence in their relationships, finding respite to recover from the emotional and physical violence suffered in those relationships, gaining resources to ensure the end of their temporary homelessness and obtaining skills to promote independence from future violence. Many supportive services are offered in a central location accessible to survivors in the core service area of southeast Baltimore County. Childcare supports are provided for adult-centered supportive services, and FCC supports alignment of services for children and adults to be offered simultaneously along with a number of supportive services that enhance parent-child interactions. During the COVID-19 pandemic, services were also offered virtually. FCC learned this allowed for an even greater number of community-based survivors to participate and intends to maintain virtual offerings of supportive services.

4A-4f.	IA-4f. Trauma-Informed, Victim-Centered Approaches-New Project Implementation.			
	NOFO Section II.B.11.			
	Provide examples in the field below of how the new project	et will:		
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1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;			
2.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;			
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;			
4.	place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;			
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;			
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and			
7.	offer support for parenting, e.g., parenting classes, childcare.			

(limit 5,000 characters)

- 1-The program operates as a Housing First model. We provide survivors information on eligibility, availability, cost, and short vs long-term housing options. We then support them as they make decisions based on this information and the needs, resources, wishes and safety concerns they have for themselves.
- 2-Because the abuse of power is such a central component of domestic violence, we see a culture of respect and true partnership as a critical component of our work. We build relationships with participants in our programs based on those core values. We also hold staff and survivors to the same standards of respectful interaction and ensure that everyone understands and has full access to grievance procedures.
- 3-All program staff receive general training on trauma as well as specialized training on the impact of family violence on adults, adolescents, and children. The clinical staff includes trauma information in their individual and group work with survivors. They also ensure that all agency programs and services are trauma informed.
- 4-Our case managers use a strength inventory that assesses personal skills and abilities that survivors can use to move through the current crisis and plan for their futures. It also identifies community and social network strengths that are available to support them through the varying stages of re-building their lives.
- 5-Staff received training on diversity and cultural competence. It helps build understanding and relationships with survivors and among staff members. With this knowledge, internal policies and procedures are more sensitive to the varying background of our participants. They are also able to pass on this knowledge to participants to ensure both shelter and other group settings provide the same sense of belonging and safety for all participants.
 6-All participants, who are interested, can participate in clinical groups, educational/art groups and social activities with other survivors. They are also informed of spiritual, educational, athletic, and social groups available in the community.
- 7-Through our partnership with the Abilities Network, parents have full access to regular parenting and children's groups.

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4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.

We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/15/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	Local Competition	11/15/2021
1E-2. Project Review and Selection Process	Yes	Project Review an	11/15/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting-Pr	11/15/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting-Pr	11/16/2021
1E-6. Web Posting–CoC- Approved Consolidated Application	Yes	Web Posting-CoC-A	11/16/2021
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin	11/16/2021
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal	11/16/2021
3C-2. Project List for Other Federal Statutes	No		

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Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description:

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Document Description:

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Project Review and Selection Process

Attachment Details

Document Description: Public Posting-Projects Rejected-Reduced

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Attachment Details

Document Description: Public Posting-Projects Accepted

Attachment Details

Document Description: Web Posting–CoC-Approved Consolidated

Application

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreement

Attachment Details

Document Description:

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Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	11/10/2021
1B. Inclusive Structure	11/15/2021
1C. Coordination	11/16/2021
1C. Coordination continued	11/16/2021
1D. Addressing COVID-19	11/16/2021
1E. Project Review/Ranking	11/16/2021
2A. HMIS Implementation	11/09/2021
2B. Point-in-Time (PIT) Count	10/27/2021
2C. System Performance	11/16/2021
3A. Housing/Healthcare Bonus Points	11/10/2021
3B. Rehabilitation/New Construction Costs	11/08/2021

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3C. Serving Homeless Under Other Federal 11/08/2021

Statutes

4A. DV Bonus Application 11/15/2021

4B. Attachments Screen 11/16/2021

Submission Summary No Input Required

Score	Domain	1	2	3	4	5
	Chronically Homeless	Chronically homeless (See pg 2 for full definition)				Not chronically homeless
	Housing		In transitional, temporary or substandard housing; and/or current rent/mortgage payment is unaffordable (over 30% of income)	In stable housing that is safe but only marginally adequate	Household is in safe, adequate subsidized housing	Household is safe, adequate, unsubsidized housing
	Employment	No job	Temporary, part-time or seasonal; inadequate pay, no benefits	Employed full time; inadequate pay; few or no benefits	Employed full time with adequate pay and benefits	Maintains permanent employment with adequate income and benefits
	Income	No income		Can meet basic needs with subsidy; appropriate spending	Can meet basic needs and manage debt without assistance	Income is sufficient, well managed; has discretionary income and is able to save
		No food or means to prepare it. Relies to a significant degree on other sources of free or low-cost food	Household is on food stamps	Can meet basic food needs, but requires occasional assistance	Can meet basic food needs without assistance	Can choose to purchase any food household desires
	Childcare	Needs childcare, but none is available/accessible and/or child is not eligible	Childcare is unreliable or unaffordable, inadequate supervision is a problem for childcare that is available	Affordable subsidized childcare is available, but limited	Reliable, affordable childcare is available, no need for subsidies	Able to select quality childcare of choice or N/A
	Children's Education	One or more eligible children not enrolled in school		Enrolled in school, but one or more children only occasionally attending classes	Enrolled in school and attending classes most of the time	All eligible children enrolled and attending on a regular basis and making progress or N/A
	Adult Education	Literacy problems and/or no high school diploma/GED are serious barriers to employment	Enrolled in literacy and/or GED program and/or has sufficient command of English to where language is not a barrier to employment	Has high school diploma/GED but may also suffer from literacy problems	Needs additional education/training to improve employment situation and/or to resolve literacy problems to where they are able to function effectively in society	Has completed education/training needed to become employable. No literacy problems
	Health Care Coverage	No medical coverage with immediate need		Some members (e.g. children) covered, but adults may lack coverage	All members can get medical care when needed, but may strain budget	All members are covered by affordable, adequate health insurance
	Life Skills		Can meet a few but not all basic needs of daily living without assistance	Can meet most but not all basic needs of daily living without assistance	Able to meet all basic needs of daily living without assistance	Able to provide beyond basic needs of daily living for self and family

Score	Domain	1	2	3	4	5
	Family Relations	Lack of necessary support from family or friends and/or abuse (DV, child) is present or there is child neglect	members do not relate well with one	Some support from family/friends; family members acknowledge and seek to change negative behaviors; are learning to communicate and support	Strong support from family or friends. Household members support each other's efforts	Has healthy/expanding support network; household is stable and communication is consistently open
	Mobility	No access to transportation, public or private; may have car that is inoperable	unaffordable; may have car but no	Transportation is available (including bus) and reliable, but limited and/or inconvenient; drivers are licensed and minimally insured	Transportation (including bus) is generally accessible to meet basic travel needs	Transportation is readily available and affordable; car is adequately insured
	Parenting Skills	Safety concerns regarding parenting skills and there is no extended family support	Parenting skills are minimal and there is limited extended family support	Parenting skills are apparent but not adequate	Parenting skills are adequate	Parenting skills are well developed or N/A
	Legal	Current outstanding tickets or warrants or other serious unresolved legal issues		Fully compliant with probation/parole terms; past non-violent felony convictions; working on plan to resolve other legal issues	Has successfully completed probation/parole within past 12 months, no new charges filed; resolved other legal issues	No active legal issues in more than 12 months and/or no felony/significant legal/criminal history
	Mental Health	Danger to self or others; recurring suicidal ideation; experiencing severe difficulty in day-to-day life due to psychological problems	self/others; persistent problems with	Mild symptoms may be present but are transient; only moderate difficulty in functioning due to mental health problems	Minimal symptoms that are expectable responses to life stressors; only slight impairment in functioning	Symptoms are absent or rare; good or superior functioning in wide range of activities; no more than every day problems or concerns
	Substance Abuse	Meets criteria for severe abuse/dependence; resulting problems so severe that institutional living or hospitalization may be necessary	Meets criteria for dependence; preoccupation with use and/or obtaining drugs/alcohol; withdrawal or withdrawal avoidance behaviors evident; use results in avoidance or neglect of essential life activities	P	Client has used during last 6 months, but no evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use; no evidence of recurrent dangerous use	No drug use/alcohol abuse in last 6 months
	Safety	Home or residence is not safe, lethality is high	Safety is threatened, temporary protection is available, lethality is high	Safety is minimally adequate, safety planning is essential	Home is safe, however, future is uncertain, safety planning is important	Home is apparently safe and stable
	Credit	Bankruptcies/ Foreclosures/ Evictions	Outstanding Judgements/ Garnishments	Needs a creidt repair plan	Moderate budgeting skills	Manageable budget and ability to save
	Disabilities	In crisis - acute or chronic symptoms affecting housing, employment, social interactions, etc always	chronic symptoms affecting housing,	Safe - rarely has acute or chronic symptoms affecting housing, employment, social interactions, etc.	Building Capacity - asymptomatic. Condition may be controlled by services and/or medication	Thriving - No identified disability

Definition of Chronically Homeless:

- (1) A "homeless individual with a disability," as defined in the ACT, who:
- -Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
- -Has been homeless (as described above) continuously for at least 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total at least 12 months -Occasions separated by a break of at least 7 nights

 - -Stays in institution of fewer than 90 days do not constitute a break
- (2) An individual who has been residing in an institutional care facility for fewer than 90 days and met all of the criteria in paragraph 1 of this definition, before entering that facility, or
- (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraphs 1 and 2 of this definition, including a family whose composition has fluctuated while the head of household has been homeless

HUD CoC + HUD ESG + DHCD HSP

- 2021 HUD CoC Grants Inventory Worksheet (posted 8/18/21)
- 2021 HUD CoC NOFO Announcement (posted 8/18/21)
- 2021 HUD CoC NOFO Collaborative Application draft (posted 11/15/21)
- 2021 HUD CoC NOFO Debrief (posted 9/23/21)
- 2021 HUD CoC NOFO Detailed Instructions Collaborative App (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions New Apps (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions Planning App (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions Renewal App (posted 9/20/21)
- 2021 HUD CoC NOFO Overview Webinar (posted 9/23/21)
- 2021 HUD CoC NOFO Project Priority Listing (pending)
- 2021 HUD CoC NOFO Projects Accepted and Rejected (pending)
- 2021 HUD CoC NOFO Rating + Ranking: Committee Review (posted 11/4/21)
- 2021 HUD CoC NOFO Rating + Ranking: Procedure & Tool (posted 10/15/21)
- 2021 HUD CoC NOFO Rating + Ranking: Results (posted 11/4/21)
- 2021 HUD CoC NOFO Rating + Ranking: Project Scores (posted 11/4/21)
- 2021 HUD CoC NOFO Submission Deadlines & ARD (posted 8/18/21)
- CoC Governance Charter w/Appendices (posted 9/23/19)
- HSP Monitoring Doc Checklist
- HSP Monitoring Tool: CoC (grantees)
- HSP Monitoring Tool: DHCD
- HSP Rating + Ranking Results FY20 (posted 6/9/20)

FW: FY 2021 Continuum of Care (CoC) Program Competition

Keenan Jones

Wed 8/18/2021 2:52 PM

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    <angels@heavenonearthnow.net>; janice@hruthmd.org <janice@hruthmd.org>; jwhite@hruthmd.org <jwhite@hruthmd.org>;
    ptimilsina@hruthmd.org <ptimilsina@hruthmd.org>; aimee.harmon-darrow@hud.gov <aimee.harmon-darrow@hud.gov>; cbrocht@jcsbaltimore.org
    <cbrocht@jcsbaltimore.org>; jdrebing@jcsbaltimore.org <jdrebing@jcsbaltimore.org>; lwashington@jcsbaltimore.org
    <lwashington@jcsbaltimore.org>; sland@jcsbaltimore.org <sland@jcsbaltimore.org>; cprince4@jhmi.edu <cprince4@jhmi.edu>;
    CSHORT@KTSMHG.com <CSHORT@KTSMHG.com>; cadams@ktsmhg.com <cadams@ktsmhg.com>; NPETTIFORD@KTSMHG.COM
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<NPETTIFORD@KTSMHG.COM>; cnewton@newton-evans.com <cnewton@newton-evans.com>; leslie@lcsconsultant.com <leslie@lcsconsultant.com>; cbrinkleyscott@yahoo.com <cbrinkleyscott@yahoo.com>; menowinc@gmail.com <menowinc@gmail.com>; angel.powell@maryland.gov <angel.powell@maryland.gov>; abbe.newday@gmail.com <abbe.newday@gmail.com>; judith.cabral@maryland.gov <judith.cabral@maryland.gov>; priya.arokiaswamy@maryland.gov <priya.arokiaswamy@maryland.gov>; wayne.millette1@maryland.gov <wayne.millette1@maryland.gov>; dsullivan@mdfoodbank.org <dsullivan@mdfoodbank.org>; ealt@mdfoodbank.org <ealt@mdfoodbank.org</p> carrie.m.clark@medstar.net <carrie.m.clark@medstar.net>; diana.pancu@medstar.net <diana.pancu@medstar.net>; elizabeth.sebastiao@medstar.net <elizabeth.sebastiao@medstar.net>; kelly.s.myers@medstar.net <kelly.s.myers@medstar.net>; martha.a.fields@medstar.net <martha.a.fields@medstar.net>; anitayawson50@yahoo.com <anitayawson50@yahoo.com>; jasmineshantell28@yahoo.com <jasmineshantell28@yahoo.com>; heatheryoung27@aol.com <heatheryoung27@aol.com>; thebosticproject@gmail.com <thebosticproject@gmail.com>; pw@organizationofhope.org <pw@organizationofhope.org>; keving@peponline.org <keving@peponline.org</pre> michelew@peponline.org <michelew@peponline.org>; sarrinak@peponline.org <sarrinak@peponline.org>; katlee@pressleyridge.org <katlee@pressleyridge.org>; mmittelman@pressleyridge.org <mmittelman@pressleyridge.org>; nstrohminger@pressleyridge.org <nstrohminger@pressleyridge.org>; SMorrison@PressleyRidge.org < SMorrison@PressleyRidge.org>; dringo@projectplase.org <dringo@projectplase.org>; hdaniel@projectplase.org <hdaniel@projectplase.org>; anthonyhaskins@prologueinc.org <anthonyhaskins@prologueinc.org>; evavalentine@prologueinc.org <evavalentine@prologueinc.org>; margaretcarnegie@prologueinc.org <margaretcarnegie@prologueinc.org>; marybethbaughman@prologueinc.org <marybethbaughman@prologueinc.org>; nicoleconnelly@prologueinc.org <nicoleconnelly@prologueinc.org>; pattiappel@prologueinc.org <pattiappel@prologueinc.org < sendykrommel@prologueinc.org <sendykrommel@prologueinc.org>; phinton48@qmail.com <phinton48@gmail.com>; brendan@sbrothersdev.com

sbrendan@sbrothersdev.com>; Elaine.Scott@sheppardpratt.org <Elaine.Scott@sheppardpratt.org>; John.Pomory@sheppardpratt.org < John.Pomory@sheppardpratt.org>; Natalie.Daniels@sheppardpratt.org < Natalie.Daniels@sheppardpratt.org>; smalltimorehomes.org@gmail.com <smalltimorehomes.org@gmail.com>; esimmons@scsmd.org <esimmons@scsmd.org>; april.ferguson@vincentbaltimore.org <april.ferguson@vincentbaltimore.org>; chalon.thompson@vincentbaltimore.org <chalon.thompson@vincentbaltimore.org>; Jermica.Wallace@vincentbaltimore.org < Jermica.Wallace@vincentbaltimore.org >; john.schiavone@vincentbaltimore.org <john.schiavone@vincentbaltimore.org>; joseph.brown@vincentbaltimore.org <joseph.brown@vincentbaltimore.org>; laura.starsoneck@vincentbaltimore.org <laura.starsoneck@vincentbaltimore.org>; mary.rode@vincentbaltimore.org <mary.rode@vincentbaltimore.org>; matthew.kurlanski@vincentbaltimore.org <matthew.kurlanski@vincentbaltimore.org>; toni.boulware@vincentbaltimore.org <toni.boulware@vincentbaltimore.org>; president@studentsupportnetwork.org <cmcdonald@turnaroundinc.org>; speterson@turnaroundinc.org <speterson@turnaroundinc.org>; shellybee500@gmail.com <shellybee500@gmail.com>; angie.mcallister@Uwcm.org <angie.mcallister@Uwcm.org>; scott.gottbreht@uwcm.org <scott.gottbreht@uwcm.org <scott.gottbreht@uwcm.org < aimee.olivera-sanchez@va.gov <aimee.olivera-sanchez@va.gov>; alexus.johnson10@va.gov <alexus.johnson10@va.gov>; Camilla.Carr@va.gov <Camilla.Carr@va.gov>; Lauren.Biggs2@va.gov <Lauren.Biggs2@va.gov>; tifnie.criner@va.gov <tifnie.criner@va.gov>; hilary@airshome.org <hilary@airshome.org>;

Importance: High

The NOFA has been released!!

From: Harmon-Darrow, Aimee <Aimee.Harmon-Darrow@hud.gov>

Sent: Wednesday, August 18, 2021 2:46 PM

To: Agustin, Irene (MOHS) <Irene.Agustin@baltimorecity.gov>; Amir Assadi <aassadi@baltimorecountymd.gov>; Amy Collier (acollier@cc-md.org) <acollier@cc-md.org) <acollier@cc-md.org>; Anthony Butler <Anthony@airshome.org>; Bill Wells <William.Wells1@baltimorecity.gov>; Colleen Mahony <cmahony@baltimorecountymd.gov>; Crista Taylor (crista.taylor@bhsbaltimore.org) <crista.taylor@bhsbaltimore.org>; Katie Yorick (Katie.Yorick@baltimorecity.gov) <Katie.Yorick@baltimorecity.gov>; Keenan Jones <kejones@baltimorecountymd.gov>; King, Troy N. (DGS) <TKing@baltimorecity.gov>; Lacey Adams <Lacey@airshome.org>; Lauren Thomas <Ithomas2@baltimorecountymd.gov>; Liz Van Oeveren <Elizabeth.VanOeveren@bhsbaltimore.org>; Martins-Evora, Maria <Maria.MartinsEvora@baltimorecity.gov>; Megan Goffney <mgoffney@canconnects.org>; Nandi, Paroma <Paroma.Nandi@baltimorecity.gov>

Subject: FW: FY 2021 Continuum of Care (CoC) Program Competition

Importance: High

CAUTION: This message from <u>Aimee.Harmon-Darrow@hud.gov</u> originated from a non Baltimore County Government or non BCPL email system. Hover over any links before clicking and use caution opening attachments.

The NOFA is now available for the 2021 COC Competition. See below.

Aímee Harmon-Darrow, M.S.W., M.S.R.E.

[she/her/hers]

Senior Financial Analyst

U.S. Department of Housing and Urban Development

Baltimore Field Office

Bank of America Building, Tower II 100 S. Charles Street 5th Floor Baltimore, MD 21201 410.209.6520 (direct) 410.209.6672 (fax) 410.971.0576 (cell)

From: SNAPS-COMPETITIONS < <u>SNAPS-COMPETITIONS@HUD.GOV</u>>

Sent: Wednesday, August 18, 2021 2:35 PM **To:** <u>SNAPS-COMPETITIONS-L@HUDLIST.HUD.GOV</u>

Subject: FY 2021 Continuum of Care (CoC) Program Competition

The Notice of Funding Opportunity (NOFO) for the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition (NOFO) has been posted on <u>Grants.gov</u> and will be available on the <u>Funding Opportunities</u> page on HUD's website later today. Additional resources will be available on the <u>Continuum of Care Program Competition</u> page of HUD's website.

The CoC Application, CoC Priority Listing, and Project Applications should be available Thursday, August 19, 2021 in <u>e-snaps</u>. Collaborative Applicants and project applicants will be able to access the applications to review, update, and enter required information for the application process.

Submission Deadline: Thursday, November 16, 2021 at 8:00 PM EST

Collaborative Applicants

- The CoC Application and CoC Priority Listing that includes all project applications that will be submitted to HUD are separate submissions in *e-snaps*. Collaborative Applicants must submit both parts of the CoC Consolidated Application by the application submission deadline for HUD to consider the CoC Consolidated Application to be complete.
- There are six Project Listings in the CoC Priority Listing; however, only the New and Renewal Project Listings require unique rank numbers. The remaining four Project Listings only require Collaborative Applicants to accept or reject project applications.
- The CoC Competition Report, and instructions on how to access the report, that includes data reported in the Homelessness Data Exchange (HDX) is available for use by Collaborative Applicants to complete portions of the FY 2021 CoC Application.

Project Applicants

- Returning project applicants can choose to import the FY 2019 renewal project application responses; however, this must be requested during your registration of the Renewal Funding Opportunity in *e-snaps* and is only available if you submitted a renewal project application in the FY 2019 CoC Program Competition. Imported responses must be carefully reviewed to ensure accuracy.
- First-time renewal projects must complete the entire renewal project application, including any first-time renewal projects awarded funds under the FY 2020 CoC Program Non-competitive Funding Notice.
- New project applications must be completed in full and in accordance with the new project application components permitted in this year's Competition.
- YHDP replacement project applications must be completed in full and in accordance with the YHDP replacement project application process outlined in the NOFO.
- CoC planning and UFA Costs applications will only be reviewed if submitted by the CoC's designated Collaborative Applicant identified in the CoC Applicant Profile in *e-snaps*.
- Dedicated HMIS projects, renewal and new, can only be submitted by the CoC's designated HMIS Lead as identified in the CoC Applicant Profile in *e-snaps*.

Additional Guidance

The following additional guidance will be posted on the <u>CoC Program Competition</u> page of HUD's website between August 19, 2021 and August 23, 2021:

FY 2021 CoC Estimated ARD Reports

- Detailed Instructions
 - CoC Application
 - CoC Priority Listing
 - Project Applications all types
- Navigational Guides
 - Accessing the Project Application
 - New Project Application
 - Renewal Project Application
 - UFA Costs Project Application
 - Planning Costs Project Application
 - CoC Priority Listing

Additional guidance including Frequently Asked Questions (FAQs) and remaining Navigational Guides will be posted to the CoC Program Competition page within the next two weeks.

Questions

Questions regarding the FY 2021 CoC Program Competition process must be submitted to cocNoFO@hud.gov.

Questions related to *e-snaps* functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to <u>e-snaps@hud.gov</u>.

Listsery Notifications

If you are aware or suspect that the Collaborative Applicant or project applicant for your CoC is not currently receiving these listserv messages, please forward the following link so the Collaborative Applicant or project applicant can register to receive listserv messages as this is the only form HUD uses to communicate CoC Program information to the public:

- SNAPS Competitions, specifically for Competition related messages; and
- SNAPS Program Information, general information regarding SNAPS programs.



We hope that you will want to continue receiving information from HUD.

We safeguard our lists and do not rent, sell, or permit the use of our lists by others, at any time, for any reason.

HUD COVID-19 Resources and Fact Sheets

If you wish to be added or removed from this mail list, please go here and follow the instructions to either subscribe or unsubscribe.

Baltimore County CoC Rating and Ranking Process

Each year the U.S. Department of Housing and Urban Development (HUD) allocates funding for homeless assistance programs through the Continuum of Care (CoC) competition process. In order to receive funding, each CoC must submit a consolidated application for funding that describes how local activities meet or exceed HUD requirements and are aligned with community needs. The CoC is required to rank in order of priority funding requests from all eligible providers for inclusion in the Consolidated Application. In accordance with HUD's Homeless Policy and Program Priorities (as stated in the 2021 HUD CoC Program Application Notice of Funding Opportunity (NOFO), the CoC will prioritize project applications based on the extent to which they advance these goals:

- 1. End homelessness for all persons The CoC will consider at a minimum, each applicant's:
 - a. Performance against system outcomes including the average length of homeless episodes, rates of return to homelessness, and other factors to determine whether the applicant is effectively serving people experiencing homelessness;
 - b. Outreach strategies to identify and continuously engage unsheltered individuals and families;
 - c. Serve individuals and families identified by the CoC as having the highest needs and longest experiences of homelessness;
 - d. Partnerships with housing, health care and service agencies to increase permanent housing options for unsheltered people with high rates of physical and mental illness and substance use disorders; and
 - e. Other CoC specific criteria outlined in the CoC's annual application scoring document(s)
- 2. Create a systemic response to homelessness and improve system performance The CoC will consider at a minimum:
 - a. How effectively each applicant's project ensures that homeless assistance is well coordinated, well managed, inclusive, transparent, and achieves positive outcomes
 - b. Meets CoC System Performance Goals including length of stay, exits to permanent housing, increased income, and recidivism
 - c. Participates in the CoC's Coordinated Entry process to promote participant choice, coordinate homeless assistance and ensure timely access to mainstream housing and services
 - d. Cost effectiveness
 - e. Looks to implement continuous quality improvement and other process improvement strategies
- 3. Strategically allocate and use resources The CoC will consider at a minimum, each applicant's:
 - a. Cost effectiveness
 - b. Match and leveraging contributions
 - c. Project quality and performance
 - d. Use of mainstream and community-based resources
 - e. Partnerships with other government, faith-based, and nonprofit resources specializing in areas such as treating mental illness and substance abuse, job training, life skills, and similar activities that help CoC Program participants, whenever possible, reach recovery, self-sufficiency, and independence
- 4. Use a Housing First Approach The CoC will prioritize projects that use a housing first approach and employ strong use of data and evidence, including cost-effectiveness and

impact of homelessness programs on positive housing outcomes, recovery, self-sufficiency, and reducing homelessness. The CoC will evaluate projects using these measures:

- a. Reduces unsheltered homelessness
- b. Prioritizes rapid placement and stabilization in permanent housing
- c. Rates of positive housing outcomes
- d. Improvements in employment and income
- e. Improvements in overall well-being
- f. Engages landlords and property managers as partners in housing re-stabilization
- g. Promotes client-centered service
- 5. Promote racial equity The CoC will consider at a minimum, each applicant's:
 - a. Policies, procedures, and processes for addressing racial disparities
 - b. Organizational diversity
 - c. Intentional efforts to improve access by and positive program outcomes for Black, Indigenous, and other people of color (BIPOC)
- 6. Authentic and continuous partnership with persons with lived experience The CoC will consider at a minimum, each applicant's:
 - a. Inclusion of past and current participants in policy development and decision making
 - b. Hiring practices that seek opportunities to hire people with lived experience

Baltimore County CoC (MD-505) is eligible to renew a total of 19 projects for the 2021 HUD CoC Program Competition. Projects are eligible for renewal for FY 2021 funds if they have an executed grant agreement by December 31, 2021 and have an expiration date that occurs in Calendar Year 2022 (the period between January 1, 2022 and December 31, 2022). These projects are renewable under the CoC Program Competition as set forth in 24 CFR 578.33 to continue ongoing leasing, operating, supportive services, rental assistance, HMIS, and project administration costs. "The FY 2021 CoC Program Competition Estimated ARD Report" for the CoC reflects the opportunity for funding at the following levels: \$6,141,336 for renewal/reallocation/consolidation/transition projects, \$201,484 for the planning project, \$335,807 for new projects under the permanent housing bonus, and \$676,957 for new projects under the DV housing bonus to provide survivors of domestic violence with PH-RRH or TH-RRH.

All applications will be ranked in two tiers; Tier 1 is equal to \$2.831,677. Tier 1 ranked projects will be fully funded as long as the CoC's application meets all threshold and eligibility requirements and the Federal government provides sufficient funding. Tier 2 projects will be evaluated based on a combination of the CoC application score, ranking order, and adoption of Housing First tenets and will be assigned eligible points based on their ranking by the CoC in Tier 2. HUD will select projects in order of point value until there are no more funds available. Projects placed in Tier 2 are at the highest risk of non-funding.

Each Project Application is scored individually with ranking priority determined by committee consensus. All applicants will be notified directly regarding the recommendations of the committee. If a project is not recommended for funding, the committee will notify the project applicant, in writing, of this decision. Once the committee has concluded its review and ranking, the recommendations will be presented to the entire CoC for discussion and ratification. At this time there will be an opportunity for any person or organization disagreeing with the ranking order to provide argument for an alternative ranking. Final ratification will be determined by majority vote of all CoC members present, with each organization or agency in good standing

receiving a single vote.

Applicants may appeal any of the following decisions of the CoC Rating and Ranking Committee:

- Placement of a project in Tier 2
- Reduction of a renewal grant amount (i.e. renewal grant partially re- allocated to a new project).
- Reallocation of a renewal grant (i.e. entire grant reallocated to a new project) if not previously notified that the grant was to be reallocated as a result of low performance.

Applicants may request a debriefing but may not appeal the following decisions of the CoC Rating and Ranking Committee:

• Non selection of a project for inclusion in the CoC application.

Applicants placed in Tier 1 may not appeal their rank on the Project Priority Listing.

Any agency that wishes to appeal or request a debriefing must notify the CoC Lead in writing via email at kejones@baltimorecountymd.gov with a copy to jburns@baltimorecountymd.gov no later than two business days after the priority ranking has been communicated in writing.

An appeal and/or debriefing request must state the following:

- Agency Name
- Project Name
- Reason for appeal/debriefing (no longer than two pages)

If an appeal is filed, other agencies whose rank may be affected will be notified as a courtesy. Such agencies will not be able to file an appeal until after the appeals process is complete.

The Rating and Ranking Committee will review all appeals and will make recommendations to the CoC Executive Committee for final approval. All impacted applicants (if any) will be notified of the outcome within 3 days of receipt of their appeal.

If a debriefing is requested, the CoC Lead will schedule the meeting and provide comments to the applicant regarding their application submission and factors impacting non-selection. There is no impact on other applicants or the R+R Committee related to this administrative review.

Rating Tool: Bonus Projects

NEW DDO JECTS BATING TOOL			
NEW PROJECTS RATING TOOL Project Name:			
Organization Name:			
Project Type: Project Identifier:			
	POINTS		MAX POINT
RATING FACTOR EXPERIENCE	AWARDED		VALUE
	$\overline{}$		5.68
A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.		out of	15
B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no			
preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure		out of	10
that project participation is terminated in only the most severe cases.			
C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely		10035	
reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.		out of	5
Experience Subtotal	0	out of	30
DESIGN OF HOUSING & SUPPORTIVE SERVICES		7	
A. Extent to which the applicant			
Demonstrate understanding of the needs of the clients to be served. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served.			
3. Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served.		out of	15
 Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. 			
B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.		out of	5
C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently.		out of	5
Design of Housing & Supportive Services Subtotal	0	out of	25
TIMELINESS			
A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60		out of	10
days, 120 days, and 180 days after grant award.			
Timeliness Subtotal	0	out of	10
FINANCIAL			
A. Project is cost-effective - comparing projected cost per person served to CoC average within project type.		out of	5
B. Audit: 1. Most recent audit found no exceptions to standard practices	_	out of	5
Most recent audit identified agency as flow risk	=	out of	5
3. Most recent audit indicates no findings	\equiv	out of	5
NEW PROJECTS RATING TOOL			
Project Name:			
Organization Name: Project Type:			
Project Identifier:			
RATING FACTOR	POINTS AWARDED		MAX POINT VALUE
C. Documented match amount		out of	5
Budgeted costs are reasonable, allocable, and allowable	=	out of	20
Financial Subtotal	0	out of	45
PROJECT EFFECTIVENESS			
Coordinated Entry Participation- 95% of entries to project from CE referrals		out of	5
Project Effectiveness Subtotal	0	out of	5
OTHER AND LOCAL CRITERIA			
Other and Local Criteria Subtotal	0	out of	0
TOTAL SCORE	0	out of	115
Weighted Rating Score		out of	100
PROJECT FINANCIAL INFORMATION			
CoC funding requested NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab Amount of other public funding (federal, state, county, city)		5	- 4
Amount of other public funding (reserval, state, county, city) Amount of private funding			
TOTAL PROJECT COST		5	12

Rating Tool: Renewal PSH

	RENEWAL/EX	PANSION PROJECT RATING	TOOL		
Project Name	<u> </u>				
Organization Name	7.				
Project Type Project Identifier					
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED	MAX POIN VALUE
PERFORMANCE MEASURES	PERFORMANCE GOAL		New Control of the Co	Minney	- Marie
ength of Stay					
Exits to Permanent Housing					
Permanent Supportive-Housing	90% remain in or move to PH		%	out of	25
Returns to Homelessness			11		
Within 12 months of exit to permanent housing	s 15% of participants return to homelessness w	within 12 months of exit to PH	%	out of	15
New or Increased Income and Earned Income					
Earned income for project stayers	8%+ of participants with new or increased inco		%	out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased inc	ome	%	out of	2.5
	Performance Measures Subtotal			0 out of	45
SERVE HIGH NEED POPULATIONS					150
Permanent Supportive-Housing	≥ 80% of participants with zero income at entry	ů .		out of	10
Permanent Supportive-Housing	≥ 75% of participants with more than one disab		%	out of	10
Permanent Supportive-Housing	≥ 75% of participants entering project from pla			out of	10
31100	Serve High Need Populations Subtotal	CONTROL OF CONTROL CONTROL OF STANCE OF STANCE	- 70	0 out of	30
	and influence of an artist of the second				
PROJECT EFFECTIVENESS			<u> </u>	36 15	
Project has reasonable costs	Costs are within local average cost per positive	housing exit for project type		out of	20
Coordinated Entry Participation	$\geq 95\%$ of entries to project from CE referrals		%	out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model			out of	10
	Project Effectiveness Subtotal			0 out of	40
OTHER AND LOCAL CRITERIA					
PSH - CoC Meeting Participation	Yes			out of	10
PSH - Officer Role in CoC and/or Committee Lead	Yes			out of	10
PSH - CoC Committee Participation	Yes			out of	5
PSH - Compliant HMIS Monitoring	Yes			out of	10
PSH - All Funds Spent	Yes			out of	20
PSH - Provided More Beds Than in Application	Yes			out of	10
PSH - Complete * Submitted Project App	Yes			out of	20
	Other and Local Criteria Subtotal			0 out of	85
Project Name Organization Name Project Type	PSH	PANSION PROJECT RATING	TOOL		
Project Identifier	(t <u> </u>			A. Carrier	**** 80 8
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED	MAX POIN VALUE
	TOTAL SCORE			0 out of	200
	Weighted Rating Score			out of	100
					1 5-10
PROJECT FINANCIAL INFORMATION					
CoC funding requested		NOTE: ENIX on the UST OF PROJECTS TO BE RE	EVIEWED (mb	\$	
Amount of other public funding (federal, state, coun	ty, city)				
Amount of private funding			000000000000000000000000000000000000000		
TOTAL PROJECT COST	***************************************	***************************************		\$	
CoC Amount Awarded Last Operating Year		NOTE: Ealt on the UST OF PROJECTS TO BE RE	SET AND LANGE STOPS		
CoC Amount Expended Last Operating Year		NOTE BUT ON THE UST OF PROJECTS TO BE RE			_

Percent of CoC funding expended last operating year

Rating Tool: Renewal RRH

Project Name	TO THE PERSON NAMED IN COLUMN 1	ANSION PROJECT RATING T	OOL		
Organization Name					
Project Type	RRH	_			
Project Identifier	n				
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
ERFORMANCE MEASURES					
ength of Stay					
Rapid Re-Housing	On average, participants are placed in housing 1	5 days after referral to RRH	days	out	of 20
xits to Permanent Housing					
Rapid Re-Housing	90% move to PH		%	out	of 25
Returns to Homelessness					
Within 12 months of exit to permanent housing	s 15% of participants return to homelessness wil	thin 12 months of exit to PH		out	of 15
New or Increased Income and Earned Income Earned Income for project stayers	8%+ of participants with new or increased incom			out	of 2.5
Non-employment income for project stayers	10%+ of participants with new or increased incor		—	out	짓!! 뭐셨
arned income for project leavers	8%+ of participants with new or increased incom		56	out	
Non-employment income for project leavers	10%+ of participants with new or increased inco		%	out	
	Performance Measures Subtotal	in a line		0 out o	of 70
SERVE HIGH NEED POPULATIONS			74 <u></u>	2 27	
Rapid Re-Housing	2 50% of participants with zero income at entry		%	out	
Rapid Re-Housing	2 50% of participants with more than one disabil		%.	out	
tapid Re-Housing	2 50% of participants entering project from place	not meant for human habitation		outo	
	Serve High Need Populations Subtotal			0 out o	of 30
PROJECT EFFECTIVENESS					
Project has reasonable costs	Costs are within local average cost per positive h	ousing exit for project type		outo	of 20
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals		%	out	of 10
lousing First and/or Low Barrier Implementation	Commits to applying Housing First model			out	of 10
	Project Effectiveness Subtotal			0 out o	of 40
At the mathematical and a to the same					70,
OTHER AND LOCAL CRITERIA	Haracon .				
RRH - CoC Meeting Participation (minimum 75%)	Yes			out	
RRH - Officer Role in CoC and/or Committee Lead	Yes			out	
RRH - CoC Committee Participation	Yes			out	
RRH - Compliant HMIS Monitoring	Yes			out	
RRH - All funds spent	Yes			out	
RRH - Complete + Submitted Project App	Yes		<u> </u>	oute	31 20
	DENEWA! /EYE	ANSION PROJECT RATING T	2001		
Project Name		ANSION PROJECT RATING T	OOL		
Project Name Organization Name	1	- 11X			
Project Type					
Project Identifier					
			PERFORMANCE	POINTS	MAX POINT
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	AWARDED	VALUE
	Other and Local Criteria Subtotal			0 out o	of 75
	V-0-2-2-2-100				
	TOTAL SCORE			0 out o	of 215
	Weighted Rating Score			oute	of 100
MONEY BULLION MEGRATION					
PROJECT FINANCIAL INFORMATION					4
oC funding requested		NOTE: East on the UST OF PHOJECTS TO BE REV.	WWED tob	5	
Amount of other public funding (federal, state, coun	ty, city)				
	ty, city)				
Amount of private funding	ty, city)				
Amount of private funding	ty, chy)			5	.4
Amount of other public funding (federal, state, count Amount of private funding FOTAL PROJECT COST COC Amount Awarded Last Operating Year COC Amount Expended Last Operating Year	ty, city)	NOTE: Fillt on the LIST OF PROJECTS TO BE REV. MOTE: Edit on the LIST OF PROJECTS TO BE REV.		5	-

Rating Tool: Renewal HMIS

	PROJECT RATING TOOL			
Project Name: Organization Name:				
Project Type: Project Identifier:				
Project identilier.	1			

RATING FACTOR	SOURCE	POINTS AWARDED	MAX POINT VALUE
LOCAL CRITERIA			
Complete Project Application	ESNAPS	out o	of 20
No Funds Recaptured	ESNAPS	out o	of 15
Timely Application Submission	ESNAPS	out	of 15
Match Letter	ESNAPS	out o	of 10
CoC Meeting Attendance 75%	CoC	out	of 10
CoC Officer Role/Committee Lead	CoC	out o	of 10
CoC Committee Participation	CoC	out o	of 10
Compliant HMIS Monitoring	HMIS	out o	of 10

Total 0

Rating Tool: Renewal SO

	PROJECT RATING TOOL
Project Name:	
Organization Name:	
Project Type: SO	*
Project Identifier:	".

RATING FACTOR	SOURCE	POINTS AWARDED	MAX POINT VALUE
LOCAL CRITERIA			
Complete Project Application	ESNAPS	out o	f 20
No Funds Recaptured	ESNAPS	out o	f 15
Timely Application Submission	ESNAPS	out o	f 15
Match Letter	ESNAPS	out o	f 10
CoC Meeting Attendance 75%	CoC	out o	f 10
CoC Officer Role/Committee Lead	CoC	out o	f 10
CoC Committee Participation	CoC	out o	f 10
Compliant HMIS Monitoring	HMIS	out o	f 10

Total 0

RENEWAL/EXPANSION PROJECT RATING TOOL

Project Name:	
Organization Name:	
Project Type:	PSH
Project Identifier:	

RATING FACTOR	PERFORMANCE GOAL	DEDECOMANCE	POINTS VARDED	MAX POINT VALUE
	PERFORMANCE GOAL	AV	VARDED	VALUE
PERFORMANCE MEASURES				
Length of Stay				
Exits to Permanent Housing				25
Permanent Supportive-Housing	90% remain in or move to PH	<u> </u>	out of	25
Returns to Homelessness				15
Within 12 months of exit to permanent housing	≤ 15% of participants return to homelessness within 12 months of exit to PH	<u> </u>	out of	15
New or Increased Income and Earned Income				2.5
Earned income for project stayers	8%+ of participants with new or increased income	<u> </u>	out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased income	%	out of	2.5
	Performance Measures Subtotal		0 out of	45
SERVE HIGH NEED POPULATIONS				
Permanent Supportive-Housing	≥ 80% of participants with zero income at entry	%	out of	10
Permanent Supportive-Housing	≥ 75% of participants with more than one disability type	%	out of	10
Permanent Supportive-Housing	≥ 75% of participants entering project from place not meant for human habitation	%	out of	10
	Serve High Need Populations Subtotal		0 out of	30
PROJECT EFFECTIVENESS				
Project has reasonable costs	Costs are within local average cost per positive housing exit for project type		out of	20
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals	%	out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model		out of	10
	Project Effectiveness Subtotal		0 out of	40
OTHER AND LOCAL CRITERIA				
PSH - CoC Meeting Participation	Yes		out of	10
PSH - Officer Role in CoC and/or Committee Lead	Yes		out of	10
PSH - CoC Committee Participation	Yes		out of	5
·				10
PSH - Compliant HMIS Monitoring	Yes	<u> </u>	out of	20
PSH - All Funds Spent	Yes		out of	
PSH - Provided More Beds Than in Application	Yes	<u> </u>	out of	10
PSH - Complete + Submitted Project App	Yes		out of	20
	Other and Local Criteria Subtotal		0 out of	85

	RENEWAL/E	XPANSION PROJECT RATING TOOL				
Project Na	me:					
Organization Na	me:					
Project Ty	/pe: PSH					
Project Identii	fier:					
RATING FACTOR	PERFORMANCE GOAL	P	ERFORMANCE	POINTS AWARDED		MAX POINT VALUE
	TOTAL SCORE			0	out of	200
	Weighted Rating Score				out of	100
PROJECT FINANCIAL INFORMATION						
CoC funding requested		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		[\$	-
Amount of other public funding (federal, state, co						
Amount of private funding						
TOTAL PROJECT COST					\$	-
CoC Amount Awarded Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab			\$	-
CoC Amount Evnended Last Operating Year		NOTE: Edit on the UST OF PROJECTS TO BE DEVIEWED to			ć	

0%

Percent of CoC funding expended last operating year

RENEWAL/EXPANSION PROJECT RATING TOOL

Project Name:	
Organization Name:	
Project Type:	RRH
Project Identifier:	

Project Identifie				
RATING FACTOR	PERFORMANCE GOAL	PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
PERFORMANCE MEASURES				
Length of Stay				
Rapid Re-Housing	On average, participants are placed in housing 15 days after referral to RRH	days	out of	20
Exits to Permanent Housing				
Rapid Re-Housing	90% move to PH	%	out of	25
Returns to Homelessness				
Within 12 months of exit to permanent housing	\leq 15% of participants return to homelessness within 12 months of exit to PH	%	out of	15
New or Increased Income and Earned Income				
Earned income for project stayers	8%+ of participants with new or increased income	%	out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased income	%	out of	2.5
Earned income for project leavers	8%+ of participants with new or increased income	%	out of	2.5
Non-employment income for project leavers	10%+ of participants with new or increased income	%	out of	2.5
	Performance Measures Subtotal		0 out of	70
SERVE HIGH NEED POPULATIONS				
Rapid Re-Housing	≥ 50% of participants with zero income at entry	%	out of	: 10
Rapid Re-Housing	≥ 50% of participants with more than one disability type	%	out of	
Rapid Re-Housing	≥ 50% of participants entering project from place not meant for human habitation	%	out of	
	Serve High Need Populations Subtotal		0 out of	30
PROJECT EFFECTIVENESS				
Project has reasonable costs	Costs are within local average cost per positive housing exit for project type		out of	: 20
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals	%	out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model		out of	
	Project Effectiveness Subtotal		0 out of	40
OTHER AND LOCAL CRITERIA				
	Yes		out of	: 10
RRH - CoC Meeting Participation (minimum 75%)		 		
RRH - Officer Role in CoC and/or Committee Lead	Yes		out of	
RRH - CoC Committee Participation	Yes		out of	
RRH - Compliant HMIS Monitoring	Yes		out of	
RRH - All funds spent	Yes		out of	
RRH - Complete + Submitted Project App	Yes		out of	20

	RENEWAL/EXP	ANSION PROJECT RATING TOOL				
Project Name	:					
Organization Name						
Project Type	RRH					
Project Identifier	:	<u></u>				
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED		MAX POINT VALUE
	Other and Local Criteria Subtotal			0	out of	75
	TOTAL SCORE			0	out of	215
	Weighted Rating Score				out of	100
PROJECT FINANCIAL INFORMATION						
CoC funding requested		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		ſ	\$	-
Amount of other public funding (federal, state, count	y, city)					
Amount of private funding						
TOTAL PROJECT COST					\$	-
CoC Amount Awarded Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		Г	\$	-
CoC Amount Expended Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab			\$	-
Percent of CoC funding expended last operating year	nr					0%

PROJECT RATING TOOL

Project Name:	
Organization Name:	
Project Type:	SO
Project Identifier:	

RATING FACTOR	SOURCE	POINTS AWARDED	MAX POINT VALUE
LOCAL CRITERIA			
Complete Project Application	ESNAPS	out of	20
No Funds Recaptured	ESNAPS	out of	15
Timely Application Submission	ESNAPS	out of	15
Match Letter	ESNAPS	out of	10
CoC Meeting Attendance 75%	CoC	out of	10
CoC Officer Role/Committee Lead	CoC	out of	10
CoC Committee Participation	CoC	out of	10
Compliant HMIS Monitoring	HMIS	out of	10

Total

PROJECT RATING TOOL

Project Name:	
Organization Name:	
Project Type:	HMIS
Project Identifier:	

RATING FACTOR	SOURCE	POINTS AWARDED		MAX POINT VALUE
LOCAL CRITERIA				
Complete Project Application	ESNAPS		out of	20
No Funds Recaptured	ESNAPS		out of	15
Timely Application Submission	ESNAPS		out of	15
Match Letter	ESNAPS		out of	10
CoC Meeting Attendance 75%	CoC		out of	10
CoC Officer Role/Committee Lead	CoC		out of	10
CoC Committee Participation	CoC		out of	10
Compliant HMIS Monitoring	HMIS		out of	10

Total

NEW PROJECTS RATING TOOL			
Project Name:			
Organization Name:			
Project Type:			
Project Identifier:			
RATING FACTOR	POINTS AWARDED		MAX POIN VALUE
EXPERIENCE			
A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.		out of	15
B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marita status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensu that project participation is terminated in only the most severe cases.	al	out of	10
C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.		out of	5
Experience Subtotal	0	out of	30
DESIGN OF HOUSING & SUPPORTIVE SERVICES			
A. Extent to which the applicant 1. Demonstrate understanding of the needs of the clients to be served.			
 Demonstrate type, scale, and location of the housing fit the needs of the clients to be served Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. 		out of	15
 Demonstrate type, scale, and location of the housing fit the needs of the clients to be served Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. 		out of out of	15 5
 Demonstrate type, scale, and location of the housing fit the needs of the clients to be served Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits 			
 Demonstrate type, scale, and location of the housing fit the needs of the clients to be served Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. 	0	out of	5
2. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served 3. Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. 4. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits 5. Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently. Design of Housing & Supportive Services Subtotal	0	out of out of	5
 Demonstrate type, scale, and location of the housing fit the needs of the clients to be served Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently. 	0 or 60	out of out of	5
2. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served 3. Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. 4. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits 5. Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs. C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently. Design of Housing & Supportive Services Subtotal TIMELINESS A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for	0 or 60 0	out of out of out of	5 5 25

NEW PROJECTS RATING TOOL			
Project Name:			
Organization Name:			
Project Type:			
Project Identifier:			
RATING FACTOR	POINTS AWARDED		MAX POINT VALUE
C. Documented match amount		out of	5
D. Budgeted costs are reasonable, allocable, and allowable		out of	20
Financial Subtotal	0	out of	45
PROJECT EFFECTIVENESS			
Plans to participate in Coordinated Entry?		out of	5
Project Effectiveness Subtotal	0	out of	5
OTHER AND LOCAL CRITERIA			
Other and Local Criteria Subtotal	0	out of	0
TOTAL SCORE	0	out of	115
Weighted Rating Score		out of	100
	·		
PROJECT FINANCIAL INFORMATION			
CoC funding requested NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		\$	-
Amount of other public funding (federal, state, county, city)			
Amount of private funding			
TOTAL PROJECT COST		\$	-

RENEWAL/EXPANSION PROJECT RATING TOOL

Project Name:

Organization Name:

Project Type:

Project Identifier:

Prologue: 38 Unit

Prologue

Prologue

PSH

RATING FACTOR	PERFORMANCE GOAL	PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
PERFORMANCE MEASURES				
Length of Stay				
Exits to Permanent Housing				
Permanent Supportive-Housing	90% remain in or move to PH	%	25 out of	25
Returns to Homelessness				
Within 12 months of exit to permanent housing	\leq 15% of participants return to homelessness within 12 months of exit to PH	%	out of	15
New or Increased Income and Earned Income				
Earned income for project stayers	8%+ of participants with new or increased income	%	2.5 out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased income	%	out of	2.5
	Performance Measures Subtotal		0 out of	45
SERVE HIGH NEED POPULATIONS				
Permanent Supportive-Housing	≥ 80% of participants with zero income at entry	%	0 out of	10
Permanent Supportive-Housing	≥ 75% of participants with more than one disability type	%	0 out of	10
Permanent Supportive-Housing	≥ 75% of participants entering project from place not meant for human habitation	%	10 out of	10
	Serve High Need Populations Subtotal		0 out of	30
PROJECT EFFECTIVENESS				
Project has reasonable costs	Costs are within local average cost per positive housing exit for project type		20 out of	20
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals	%	out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model		10 out of	10
	Project Effectiveness Subtotal		0 out of	40
OTHER AND LOCAL CRITERIA				
PSH - CoC Meeting Participation	Yes		10 out of	10
PSH - Officer Role in CoC and/or Committee Lead	Yes		10 out of	10
PSH - CoC Committee Participation	Yes		5 out of	5
PSH - Compliant HMIS Monitoring	Yes		10 out of	10
PSH - All Funds Spent	Yes		20 out of	20
PSH - Provided More Beds Than in Application	Yes		10 out of	10
PSH - Complete + Submitted Project App	Yes		20 out of	20
	Other and Local Criteria Subtotal		0 out of	85

RENEWAL/EXPANSION PROJECT RATING TOOL

Project Name: Prologue: 38 Unit
Organization Name: Prologue
Project Type: PSH
Project Identifier:

	PERFORI		TS	MAX POINT VALUE
RATING FACTOR	PERFORMANCE GOAL	PERFORMANCE AWAR	AWARDED	
TOTAL SCORE		0	out of	200
	Weighted Rating Score		84 out of	100

PROJECT FINANCIAL INFORMATION		
PROJECT FINANCIAL INFORMATION		
CoC funding requested	NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab	\$ 709,950 -
Amount of other public funding (federal, state, county, city)		177,488
Amount of private funding		
TOTAL PROJECT COST		\$ 887,438 -
CoC Amount Awarded Last Operating Year	NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab	\$ -
CoC Amount Expended Last Operating Year	NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab	\$ -
Percent of CoC funding expended last operating year		0%

Applicant	Туре	Project	Priority	Thresholds	Score	Tier 1	Tier 2	Во	nus/Planning
BCDP HMIS	Renewal	HMIS	1	Yes	100	\$168,914.00			
FCC SSO-CE	Renewal	SSO - CE	2	Yes	100	\$72,780.00			
Prologue 38 Unit	Renewal	PSH	3	Yes	84	\$709,950.00			
Prologue Housing	Renewal	PSH	3	Yes	84	\$231,352.00			
AIRS S+C	Renewal	PSH	3	Yes	84	\$57,062.00			
AIRS Samaritan	Renewal	PSH	3	Yes	82	\$159,133.00			
CC Project Promise	Renewal	PSH	3	Yes	75	\$84,380.00			
CC Hosanna House	Renewal	PSH	3	Yes	67	\$123,833.00			
SVDP INNterim Gardens	Renewal	PSH	3	Yes	66	\$274,505.00			
Prologue 13 Unit	Renewal	PSH	3	Yes	60	\$200,084.00			
CAN Arbutus	Renewal	PSH	3	Yes	49	\$92,693.00			
CAN Samaritan	Renewal	PSH	3	Yes	40	\$198,563.00			
DSS RRH	Renewal	RRH	4	Yes	74	\$227,990.00			
Prologue Outreach	Renewal	SSO	5	Yes	50	\$221,132.00			
FCC SSO-CE	Bonus: DV	(b) SSO - CE	6	Yes	92			\$	167,600.00
FCC Joint TH-RRH	Bonus: DV	(b) TH-RRH	7	Yes	84			\$	168,748.00
Prologue Youth PSH	Bonus: CoC	(b) PSH	8	Yes	95			\$	180,000.00
BCDP Planning	Planning	N/A	N/A	N/A	N/A			\$	89,265.00

FY 2021 CoC Program Competition Estimated ARD Report

\$2,831,677.00 Estimated ARD

\$2,831,677.00 Tier 1 Allocation

\$0.00 Tier 2 Allocation

\$180,612.00 Bonus (CoC)

\$541,836.00 Bonus (DV)

\$108,367.00 CoC Planning

To: <u>Mitchell Posner</u>; <u>"Megan Goffney"</u>

Cc: kejones@baltimorecountymd.gov; Heather Sheridan

Subject: FY22 Award Reduction (Reallocation)

Date: Friday, November 12, 2021 2:21:00 PM

Attachments: <u>image002.png</u>

Good afternoon CAN

This email is a follow-up to what was presented during our Homeless Roundtable meeting on 11/9/21. We mentioned during that meeting that to qualify for the three bonus projects in this year's HUD NOFO, we must re-allocate funding from the previous grant year. While we recognize that this has not happened in recent years, we believe the bonus funding will benefit our CoC as a whole and want to do all we can to qualify.

To make this process as manageable for your team as possible, we focus on re-allocating the unspent funds from the last fiscal year. According to our FY2021, your **CAN Arbutus Permanent Supportive Housing (PSH)** project had unspent **\$634.29** of its award allocation.

As of 11/15/21, we will subtract the amount above from your current grant award and will reallocate that amount to one of the bonus projects if HUD approves our request.

During the roundtable meeting, we discussed why some providers could not spend their entire award. We understood that COVID, staffing challenges, and a delay in receiving the county's funds were primary factors for most.

To ensure we have planned conversations about reallocation moving forward this coming fiscal year, we will conduct a formal grants review process during the third quarter of the year to review spending activity with each of our grantees and re-allocate as necessary. If the funds we shift now are needed for future planning discussion, please make that known.

We appreciate your understanding, and if you have any questions about this decision, you can reach out to me or Heather Sheridan at hsheridan@baltimorecountymd.gov, and we can schedule some time to discuss this.

Lauren L. Thomas



To: Nicole Connelly (nicoleconnelly@prologueinc.org)
Cc: kejones@baltimorecountymd.gov; Heather Sheridan
Subject: Notice of FY22 Award Reduction (Reallocation)
Date: Friday, November 12, 2021 2:32:00 PM

Attachments: <u>image002.png</u>

Good afternoon, Prologue

This email is a follow-up to what was presented during our Homeless Roundtable meeting on 11/9/21. We mentioned during that meeting that to qualify for the three bonus projects in this year's HUD NOFO, we must re-allocate funding from the previous grant year. While we recognize that this has not happened in recent years, we believe the bonus funding will benefit our CoC as a whole and want to do all we can to qualify.

To make this process as manageable for your team as possible, we focus on re-allocating the unspent funds from the last fiscal year. According to our FY2021, your **Prologue Housing 1&2 (PSH)** project had unspent **\$2,712.82** of its award allocation.

As of 11/15/21, we will subtract the amount above from your current grant award and will reallocate that amount to one of the bonus projects if HUD approves our request.

During the roundtable meeting, we discussed why some providers could not spend their entire award. We understood that COVID, staffing challenges, and a delay in receiving the county's funds were primary factors for most.

To ensure we have planned conversations about reallocation moving forward this coming fiscal year, we will conduct a formal grants review process during the third quarter of the year to review spending activity with each of our grantees and re-allocate as necessary. If the funds we shift now are needed for future planning discussion, please make that known.

We appreciate your understanding, and if you have any questions about this decision, you can reach out to me or Heather Sheridan at hsheridan@baltimorecountymd.gov, and we can schedule some time to discuss this.

Lauren L. Thomas



To: Nicole Connelly (nicoleconnelly@prologueinc.org)
Cc: kejones@baltimorecountymd.gov; Heather Sheridan
Subject: Notice of FY22 Award Reduction (Reallocation)
Date: Friday, November 12, 2021 2:34:00 PM

Attachments: <u>image002.png</u>

Good afternoon, Prologue

This email is a follow-up to what was presented during our Homeless Roundtable meeting on 11/9/21. We mentioned during that meeting that to qualify for the three bonus projects in this year's HUD NOFO, we must re-allocate funding from the previous grant year. While we recognize that this has not happened in recent years, we believe the bonus funding will benefit our CoC as a whole and want to do all we can to qualify.

To make this process as manageable for your team as possible, we focus on re-allocating the unspent funds from the last fiscal year. According to our FY2021, your **Prologue Outreach** project had unspent **\$739.47** of its award allocation.

As of 11/15/21, we will subtract the amount above from your current grant award and will reallocate that amount to one of the bonus projects if HUD approves our request.

During the roundtable meeting, we discussed why some providers could not spend their entire award. We understood that COVID, staffing challenges, and a delay in receiving the county's funds were primary factors for most.

To ensure we have planned conversations about reallocation moving forward this coming fiscal year, we will conduct a formal grants review process during the third quarter of the year to review spending activity with each of our grantees and re-allocate as necessary. If the funds we shift now are needed for future planning discussion, please make that known.

We appreciate your understanding, and if you have any questions about this decision, you can reach out to me or Heather Sheridan at hsheridan@baltimorecountymd.gov, and we can schedule some time to discuss this.

Lauren L. Thomas



To: Mary Rode; Kurlanski, Matthew; "Todd Studeny"; "Thompson, Chalon"

Cc: kejones@baltimorecountymd.gov; Heather Sheridan

Subject: Notice of FY22 Award Reduction (Reallocation)

Date: Friday, November 12, 2021 2:16:00 PM

Attachments: <u>image002.png</u>

Good afternoon St. Vincent de Paul,

This email is a follow-up to what was presented during our Homeless Roundtable meeting on 11/9/21. We mentioned during that meeting that to qualify for the three bonus projects in this year's HUD NOFO, we must re-allocate funding from the previous grant year. While we recognize that this has not happened in recent years, we believe the bonus funding will benefit our CoC as a whole and want to do all we can to qualify.

To make this process as manageable for your team as possible, we focus on re-allocating the unspent funds from the last fiscal year. According to our FY2021, your <u>Supportive Service</u>

Permanent Supportive Housing (SSPSH) project had unspent \$31,969.62 of its award allocation.

As of 11/15/21, we will subtract the amount above from your current grant award and will reallocate that amount to one of the bonus projects if HUD approves our request.

During the roundtable meeting, we discussed why some providers could not spend their entire award. We understood that COVID, staffing challenges, and a delay in receiving the county's funds were primary factors for most.

To ensure we have planned conversations about reallocation moving forward this coming fiscal year, we will conduct a formal grants review process during the third quarter of the year to review spending activity with each of our grantees and re-allocate as necessary. If the funds we shift now are needed for future planning discussion, please make that known.

We appreciate your understanding, and if you have any questions about this decision, you can reach out to me or Heather Sheridan at hsheridan@baltimorecountymd.gov, and we can schedule some time to discuss this.

Lauren L. Thomas



2021 HUD CoC NOFO: Rating + Ranking

Jason Burns

Thu 11/4/2021 3:36 PM

Archive

To: Keenan Jones < kejones@baltimorecountymd.gov >;

Cc:Heather Sheridan https://www.nccountymd.gov; Cynthia Williams cwilliams@baltimorecountymd.gov; Rosalyn Branson crbranson@baltimorecountymd.gov; Samantha Bochinski sbochinski@baltimorecountymd.gov; Lauren Thomas lthomas2@baltimorecountymd.gov; Lauren Thomas

HUD CoC Projects (Renewal & Bonus), our Rating and Ranking Results have been posted to our <u>homelessroundtable.org</u> site. Please see link and screenshot below.

Rating and Ranking Members, thank you very much for your hard work! We are very grateful for each of you!

2021 HUD CoC NOFO Rating + Ranking: Results (posted 11/4/21)

HUD CoC + HUD ESG + DHCD HSP

- 2021 HUD CoC Grants Inventory Worksheet (posted 8/18/21)
- 2021 HUD CoC NOFO Announcement (posted 8/18/21)
- 2021 HUD CoC NOFO Collaborative Application posted (9/16/21)
- 2021 HUD CoC NOFO Debrief (posted 9/223/21)
- 2021 HUD CoC NOFO Detailed Instructions (posted 9/20/21)
- 2021 HUD CoC NOFO Overview Webinar (posted 9/23/21)
- 2021 HUD CoC NOFO Project Priority Listing (pending)
- 2021 HUD CoC NOFO Projects Accepted and Rejected (pending)
- 2021 HUD CoC NOFO Rating + Ranking: Committee Review (posted 11/4/21)
- 2021 HUD CoC NOFO Rating + Ranking: Procedure & Tool (posted 10/15/21)
- 2021 HUD CoC NOFO Rating + Ranking: Results (posted 11/4/21)
- 2021 HUD CoC NOFO Rating + Ranking: Project Scores (posted 11/4/21)
- 2021 HUD CoC NOFO Submission Deadlines & ARD (posted 8/18/21)
- CoC News and Updates
- CoC Governance Charter w/Appendices (posted 9/23/19)
- CoC Projects Status
- HSP Monitoring Doc Checklist
- HSP Monitoring Tool: CoC (grantees)
- HSP Monitoring Tool: DHCD
- HSP Rating + Ranking Results FY20 (posted 6/9/20)

Jason Burns System Administrator 443-574-HMIS

CoC DRAFT Application for FY21 HUD NOFO

Heather Sheridan

Mon 11/15/2021 1:04 PM Archive

Importance: High

Good afternoon Roundtable members,

We have uploaded a copy of the FINAL DRAFT of our FY21 HUD NOFO application. We will be submitting this to HUD within the next 24 hours. Please email me with any edits or questions. We have not included all signature pages as we are working on finalizing those signatures, they will be included when we submit our final application.

As a reminder you can find a summary of the Rating and Ranking committee review process <u>here</u> and the results of our Rating and Ranking scoring process <u>here</u>.

The FINAL DRAFT of the application can be found https://drive.google.com/file/d/1yadVsBmoRtq0p3vsepVfl2-CUP1HQPzk/view

Thank you to everyone that submitted content for our collaborative application and renewals, we appreciate all of your work.

Heather Sheridan

Senior Advisor – Homeless Services
Department of Housing and Community Development
Baltimore County Government
The Jefferson Building
105 West Chesapeake Avenue, Suite 201

Towson, Maryland 21204 Office: 410-887-5522

Email: hsheridan@baltimorecountymd.gov

- 2021 HUD CoC Grants Inventory Worksheet (posted 8/18/21)
 2021 HUD CoC NOFO Announcement (posted 8/18/21)
- 2021 HUD CoC NOFO Collaborative Application draft (posted 11/15/21)
 2021 HUD CoC NOFO Debrief (posted 9/23/21)
- 2021 HUD CoC NOFO Detailed Instructions Collaborative App (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions New Apps (posted 9/20/21)
 2021 HUD CoC NOFO Detailed Instructions Planning App (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions Planning App (posted 9/20/21)
- 2021 HUD CoC NOFO Detailed Instructions Renewal App (posted 9/20/21)
 2021 HUD CoC NOFO Overview Webinar (posted 9/23/21)



JOHN A.OLSZEWSKI, JR. County Executive

TERRY F. HICKEY, Esq.

Director,

Department of Housing and Community Development

November 12, 2021

HUD Review Committee

This letter is in reference to the application of Baltimore County Continuum of Care (Maryland-505 CoC) application to the Fiscal Year 2021 Housing and Urban Development (HUD) Notice of Funding Opportunity (NoFO) funding round. Maryland-505 CoC is applying for the "Coordination with Housing and Healthcare Bonus."

The project will be a partnership with the CoC, Prologue Inc., Healthcare for the Homeless, Baltimore County Office of Housing and Baltimore County Department of Social Services. If awarded our CoC will utilize the \$180,000 to create 12 permanent supportive housing (PSH) units for Unaccompanied Homeless Youth ages 18-24. The grant will fund supported case management to all 12 units provided by Prologue Inc. and Healthcare for the Homeless. Both service providers will coordinate with additional county behavioral health resources as needed, with the shared goal that the youth remain housed successfully and after time, transition to independent housing. Our county currently does not have youth specific supportive housing and we have a great need.

The grant will also cover rent for nine of the 12 units. Rental for the remaining three will be supported through a dedicated Family Unification Program (FUP) voucher or a Foster Youth to Independence (FYI) voucher. The recipients of the three dedicated vouchers will meet all requirements of the voucher program and will be referred through our CoCs Coordinated Entry.

To ensure compliance with the bonus criteria, the vouchers provide a 25% match funding source that is not CoC funded. The Baltimore County office of Housing manages the county FUP and FYI voucher programs and the Department of Social Services oversees Coordinated Entry for our CoC. The signatures below, confirm a commitment to dedicate the three vouchers and work with the CoC to ensure success of the youth in this bonus project.

If you have any questions, you may reach Heather Sheridan, Senior Advisor on Homeless Services at hsheridan@baltimorecountymd.gov or at 410-887-5522.

Marsha J. Parham-Green Executive Director

Baltimore County Office of Housing

Department of Housing and Community Development

Mark Millspaugh Deputy Director

Baltimore County Department of Social Services





RE: FY21 HUD Notice of Funding Opportunity (NoFO) for Baltimore County Continuum of Care (Maryland-505 CoC)

To Whom It May Concern,

This letter is to express support for the Prologue permanent supportive housing bonus project 2022. Healthcare for the Homeless is a provider of comprehensive, personcentered medical and mental health care in Baltimore city and Baltimore county. Healthcare for the Homeless has partnered with Prologue for years to support the health needs of people experiencing homelessness. We utilize our three freestanding clinics and our mobile medical clinic to meet the medical and mental healthcare needs of clients experiencing homelessness. We intend to continue to provide these services between 7/1/2022 and 6/30/2023. We welcome referrals for our services from Prologue, and clients from Prologue are free to get their health services from any appropriate provider without effecting their PSH project eligibility. I am hopeful that Prologue will be granted the opportunity to meet the PSH needs of unaccompanied homeless youth in Baltimore county.

Best Regards,

Tyler Gray

Senior medical director of community sites

Healthcare for the Homeless